

Case Number:	CM14-0015296		
Date Assigned:	02/28/2014	Date of Injury:	12/09/2009
Decision Date:	07/02/2014	UR Denial Date:	01/22/2014
Priority:	Standard	Application Received:	02/06/2014

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is Board Certified in Dentistry and is licensed to practice in California. He/she has been in active clinical practice for more than five years and is currently working at least 24 hours a week in active practice. The expert reviewer was selected based on his/her clinical experience, education, background, and expertise in the same or similar specialties that evaluate and/or treat the medical condition and disputed items/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

The patient has been examined by [REDACTED], as an AME, and his report dated 10/10/2013 presents the following diagnosis: 1. Generalized myofascial pain (including muscles of face, neck, jaw). 2. Bruxism (teeth grinding/jaw clenching), secondary to myofascial pain and psychological factors. 3. Generalized wear/trauma to teeth, secondary to bruxism. 4. Mild salivary changes, secondary to present medication regimen. The patient's injury took place in February 2007, and that is when her jaw problems began. [REDACTED] has recommended restoration of tooth #28, which has fractured due to bruxism. The recommended restoration is a cast crown. [REDACTED] also recommends a high quality laboratory fabricated orthotic to alleviate the patient's Bruxism.

IMR ISSUES, DECISIONS AND RATIONALES

The Final Determination was based on decisions for the disputed items/services set forth below:

APPLIANCE FITTING AND TRAINING: Overturned

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: Medscape: Bruxism Management Author: Jeff Burgess, DDS, MSD; Chief Editor: Arlen D Meyers, MD, MBA.

Decision rationale: According to AME (Agreed Medical Examination) report, and above mentioned citation, an orthotic to treat this patient's Bruxism is medically necessary. Therefore, if patient is receiving an orthotic, the patient should receive proper fitting for appliance and be trained on how to use the appliance, to increase effectiveness of the oral appliance. Therefore the request for appliance fitting and training is medically necessary and appropriate.

BUILD-UP TOOTH #28: Overturned

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) ODG Head(updated 06/04/13) The International Association of Dental Traumatology (IADT) has developed guidelines for the evaluation and management of traumatic dental injuries.(Olate,2010) Dental implants, dentures, crowns, bridges, onlays, inlays, braces, pulling impacted teeth, or repositioning impacted teeth, would be options to promptly repair injury to sound natural teeth required as a result of, and directly related to, an accidental injury. Other Medical Treatment Guideline or Medical Evidence: J Biomed Mater Res B Appl Biomater. 2009 Oct;91(1):71-9. Wear and hardness of different core build-up materials. Schmage P1, Nergiz I, Sito F, Platzer U, Rosentritt M.

Decision rationale: According to above mentioned citation, "Dental implants, dentures, crowns, bridges, onlays, inlays, braces, pulling impacted teeth, or repositioning impacted teeth, would be options to promptly repair injury to sound natural teeth required as a result of, and directly related to, an accidental injury" . [REDACTED] (AME) has recommended restoration of tooth #28, which has fractured due to bruxism. The recommended restoration is a cast crown. "Before crown preparation, teeth with extensive coronal destructions are built up with core materials." (Schmage, 2009). Therefore, the request for build-up tooth #28 is medically necessary and appropriate.

CROWN TOOTH #28: Overturned

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) ODG Head(updated 06/04/13) The International Association of Dental Traumatology (IADT) has developed guidelines for the evaluation and management of traumatic dental injuries.(Olate,2010) Dental implants, dentures, crowns, bridges, onlays, inlays, braces, pulling impacted teeth, or repositioning impacted teeth, would be options to promptly repair injury to sound natural teeth required as a result of, and directly related to, an accidental injury.

Decision rationale: According to above mentioned citation, "Dental implants, dentures, crowns, bridges, onlays, inlays, braces, pulling impacted teeth, or repositioning impacted teeth, would be options to promptly repair injury to sound natural teeth required as a result of, and directly related to, an accidental injury". [REDACTED] (AME) has recommended restoration of tooth #28, which has fractured due to bruxism. Therefore, the request for crown tooth #28 is medically necessary and appropriate.