

Case Number:	CM14-0156700		
Date Assigned:	09/26/2014	Date of Injury:	01/17/2013
Decision Date:	12/03/2014	UR Denial Date:	09/23/2014
Priority:	Standard	Application Received:	09/24/2014

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 General Surgery 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:

This 58-year old male was injured 1/17/13. He suffered multiple facial injuries including a right mandibular and orbital zygomatic fracture as well as badly displaced bilateral condylar fractures. He was discharged and has not been able to open his mouth for the last year. Consultation 8/13/14 stated, his teeth now are failing with generalized periodontal disease, mobility and caries. A radiographic volumetric cone beam scan showed a right healed mandibular fracture with multiple fixation plates and screws in the right maxilla and mandibular floor. Panoramic views revealed multiple abscessed and broken teeth with advanced periodontal disease. Temporomandibular joint views demonstrated a fibroankylosis in both joints with the condyles showing severe fractures which have now fused to the joint. The diagnoses were: 1) Post traumatic ankylosis bilateral Temporomandibular joints with the condyles demonstrating severe bilateral condylar head fractures now fused to the joint and; 2) Advanced periodontal disease and caries secondary to inability to open mouth and perform oral hygiene. A CT scan of the jaw has been approved to evaluate the multiple fractures before any proposed surgery. This has been approved. The remaining requests have been denied pending the results of the CT scan so as to better determine the definitive procedures to be attempted in this patient. The remaining proposed surgeries include: bilateral Temporomandibular joint replacement, 26 dental extractions, and bilateral condylectomy and coronoidectomy.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 bilateral TMJ replacement: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITY GUIDELINES (ODG)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG)
TEMPEROMANDIBULAR JOINT DISORDER

Decision rationale: Bilateral Temporomandibular joint replacements are denied pending the result of the jaw CT scan as this may better and more accurately define the approach and detail necessary to reconstruct the bilateral Temporomandibular joints. The Surgical treatment of temporomandibular joint disorders are controversial, often irreversible, and should be avoided whenever possible. Therefore, 1 bilateral TMJ replacement is not medically necessary.

26 extractions to include surgical removal/erupt (teeth #1, 2, 3, 4, 5, 6, 10, 11, 12, 13, 14, 15, 16, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 29, 30, and 31): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITY GUIDELINES (ODG)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Temporomandibular Joint Replacement, Dale A Baur, DDS, MD; Chief Editor: Arlen D Meyers, MD, MBA;Medscape; Updated: Jun 27, 2013
Indications and Contraindications Biomet Total TMJ Replacement System

Decision rationale: The multiple dental extractions proposed are denied pending the result of the jaw CT scan as this may better and more accurately define the approach and detail necessary to reconstruct the bilateral Temporomandibular joints. Furthermore, examinations need done so as to determine what and if any of these teeth might be salvageable with the various oral surgical techniques to preserve at least a portion of the native teeth. Therefore, 26 extractions to include surgical removal/erupt (teeth #1, 2, 3, 4, 5, 6, 10, 11, 12, 13, 14, 15, 16, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 29, 30, and 31) are not medically necessary.

1 left TMJ condylectomy: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITY GUIDELINES (ODG)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Temporomandibular Joint Replacement, Dale A Baur, DDS, MD; Chief Editor: Arlen D Meyers, MD, MBA;Medscape; Updated: Jun 27, 2013
Indications and Contraindications Biomet Total TMJ Replacement System "If localized to the joint, several treatment options, including an occlusal guard, physical therapy, arthroscopy,

arthrocentesis procedures, and, finally, total joint replacement may be discussed. The following conditions frequently warrant the use of the total

Decision rationale: Bilateral Temporomandibular joint condylectomies are denied pending the result of the jaw CT scan as this may better and more accurately define the approach and detail necessary to reconstruct the bilateral Temporomandibular joints. The Surgical treatment of Temporomandibular joint disorder disorders are controversial, often irreversible, and should be avoided whenever possible. Therefore, 1 left TMJ condylectomy is not medically necessary.

1 right TMJ condylectomy: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITY GUIDELINES (ODG)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Temporomandibular Joint Replacement, Dale A Baur, DDS, MD; Chief Editor: Arlen D Meyers, MD, MBA;Medscape; Updated: Jun 27, 2013 Indications and Contraindications Biomet Total TMJ Replacement System "If localized to the joint, several treatment options, including an occlusal guard, physical therapy, arthroscopy, arthrocentesis procedures, and, finally, total joint replacement may be discussed. The following conditions frequently warrant the use of the total

Decision rationale: Bilateral Temporomandibular joint condylectomies are denied pending the result of the jaw CT scan as this may better and more accurately define the approach and detail necessary to reconstruct the bilateral Temporomandibular joints. The Surgical treatment of Temporomandibular joint disorder disorders are controversial, often irreversible, and should be avoided whenever possible. Therefore, 1 right TMJ condylectomy is not medically necessary.