MAXIMUS Federal Services

Case Number:	CM15-0207707		
Date Assigned:	10/26/2015	Date of Injury:	03/17/2015
Decision Date:	12/09/2015	UR Denial Date:	09/22/2015
Priority:	Standard	Application Received:	10/22/2015

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:
State(s) of Licensure: California
Certification(s)/Specialty: Dentist

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 injured worker is a 39-year-old male, with a reported date of injury of 03-17-2015. The diagnoses include bilateral temporomandibular joint pain, teeth hypersensitivity, traumatic injury to the teeth, face, and head, myofascial pain of the facial musculature, inflammation of the bilateral temporomandibular joints, osteoarthritis of the right temporomandibular joint, and bruxism and clenching, and grinding of the teeth and bracing of the fascial muscles. The initial report of dentistry dated 09-18-2015 indicates that the injured worker found that he was clenching his teeth and bracing his facial musculature in response to orthopedic pain and as a result of emotional stressors. The injured worker reported dry mouth and bleeding gums. It was noted that nightly obstructions of the airway caused a dry mouth condition to occur. The injured worker complained of a loss of sleep, in which the treating physician indicates can contribute to periodontal disease and gingival inflammation. The injured worker also complained of having gastric distress, in which the treating physician indicates that gastric acids entering the oral environment can demineralize the teeth and cause an acidic oral environment, which also contributes to gum inflammation. The subjective findings include difficulty in chewing hard foods due to pain in the face and teeth; sore teeth upon waking in the morning; limited opening of the mouth; bites feel off; dry mouth; and bleeding gums. The objective findings include crepitus noises palpated and heard in the right temporomandibular joint upon translation and lateral movements of the mandibular; pain upon palpation of the lateral condyle of the bilateral temporomandibular joint; teeth # 8, 9, 23, and 24 were sensitive to percussion; swelling of the gum tissues; and dental midline shift to the right at 1mm; bacterial deposits on the teeth and around the gum tissues. It was noted that the injured worker underwent an ultrasonic Doppler auscultation analysis which confirmed crepitus sounds in the right temporomandibular joint;

electromyography which showed elevated muscular activity within coordination and aberrant function of the facial musculature; diagnostic salivary flow and buffering tests which showed dry mouth, lips, and tongue, no pooling of saliva in the mouth, and a decreased salivary flow; and x-rays showed periodontal bone loss. It was note that the injured worker was temporarily partially disabled. The diagnostic studies to date related to the mouth and airway was not included in the medical records provided. Treatments and evaluation to date have included acupuncture, physical therapy, chiropractic treatment, Ibuprofen, Naproxen, Hydrocodone, and Omeprazole. The treating physician requested an immediate emergency medical treatment of an obstructive airway oral appliance and an emergency medical treatment of periodontal scaling (4 quadrants). On 09-22-2015, Utilization Review (UR) non-certified the request for an immediate emergency medical treatment of an obstructive airway oral appliance and an emergency medical treatment of periodontal scaling (4 quadrants).

IMR ISSUES, DECISIONS AND RATIONALES

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

Immediate emergency medical treatment of an Obstructive Airway Oral Appliance: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, head, dental trauma treatment for facial fractures International Association of Dental Traumatology.

MAXIMUS guideline: Decision based on MTUS General Approaches 2004, Section(s): General Approach to Initial Assessment and Documentation, Initial Approaches to Treatment, and Chronic Pain Medical Treatment 2009, Section(s): Introduction. Decision based on Non-MTUS Citation Curr Treat Options Neurol. 2014 Aug;16(8):305. DOI: 10.1007/s11940-014- 0305-6. Advances in the treatment of obstructive sleep apnea. Young D1, Collop N. PMID: 24957654.

Decision rationale: Records reviewed indicate that patient is clenching his teeth and bracing his facial musculature in response to orthopedic pain and as a result of emotional stressors. The injured worker reported dry mouth and bleeding gums. Patient complained of a loss of sleep, in which the treating physician indicates can contribute to periodontal disease and gingival inflammation. Dentist is recommending immediate emergency medical treatment of an Obstructive Airway Oral Appliance. However there is insufficient documentation for the requesting dentist [redacted]. Also, actual nocturnal polysomnographic respiratory sleep study report (from a board certified specialist in sleep medicine) is not available for review. There is insufficient rationale provided by the requesting dentist [redacted]. Due to the "Immediate emergency medical treatment" request, it may mean this patient has a severe case of sleep apnea, which patient would need to be evaluated by a board certified specialist in sleep medicine. Absent further detailed documentation and clear rationale, the medical necessity for this request is not evident. Per medical reference mentioned above "a focused medical history, work history and physical examination generally are sufficient to assess the patient who complains of an apparently job related disorder" in order to evaluate a patient's needs. This reviewer does not believe this has been sufficiently documented in this case. At this time, this reviewer finds this request for obstructive airway oral appliance not medically necessary.

Emergency medical treatment of Periodontal Scaling (4 quadrants): Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, head, dental trauma treatment for facial fractures International Association of Dental Traumatology.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Comprehensive periodontal therapy: a statement by the American Academy of Periodontology. J Periodontol2011 Jul; 82 (7): 943-9 [133 references].

Decision rationale: Records reviewed indicate that teeth # 8, 9, 23, and 24 were sensitive to percussion; swelling of the gum tissues; and dental midline shift to the right at 1mm; bacterial deposits on the teeth and around the gum tissues and x-rays showed periodontal bone loss. Per medical reference mentioned above, "Removal of supra- and subgingival bacterial plaque biofilm and calculus by comprehensive, meticulous periodontal scaling and root planning" are part of the treatment plan for periodontal therapy (J Periodontol 2011). Since this patient has been diagnosed with aggravated periodontal disease, this reviewer finds this request for one Periodontal Scaling (4 quadrants) medically necessary to prevent further teeth decay in this patient.