

<b>Case Number:</b>	CM15-0045106		
<b>Date Assigned:</b>	03/16/2015	<b>Date of Injury:</b>	06/11/2009
<b>Decision Date:</b>	04/20/2015	<b>UR Denial Date:</b>	02/17/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/09/2015

### 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 52 year old male, who sustained an industrial injury on 6/11/09. The injured worker has complaints of back and shoulder pain with a history of deep venous thrombosis (DVT) and currently on Coumadin. The documentation noted on the Clinical Note dated 2/2/15 that the injured worker refers that in 2009 she suffered trauma to her teeth that required extensive restorative treatment (on lower left quadrant), as a result her bite shifted and her teeth have moved since the accident and her retainers does not fit anymore and is very difficult for her to eat as she favors only one side of her mouth. The documentation noted rotation and crowding of lower anterior segment and #22; radiographic examination was within normal limits. The documentation noted on previous examinations the injured worker was diagnosed with orthodontic relapse. The plan was to improve the injured workers occlusion and masticatory as well as improvement on the position of crowded and rotated teeth as a result of the accident suffered.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Study model:** 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 ODG Head(updated 06/04/13) Dental trauma treatment (facial fractures).

**Decision rationale:** Records reviewed indicate that this patient has suffered trauma to teeth that required extensive restorative treatment, as a result patient states her bite shifted and her teeth have moved since the accident. Treating dentist states changes in occlusion have occurred secondary to work accident and orthodontic relapse. Recommendations include orthodontic treatment to improve patient's occlusion. Per reference mentioned above "braces, pulling impacted teeth, or re-positioning 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". Therefore, this reviewer finds this request for study model medically necessary to evaluate this patient's overcrowding.

**Sixteen (16) periodic orthodontic visits:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 2 General Approach to Initial Assessment and Documentation, Chronic Pain Treatment Guidelines CA MTUS/ACOEM Guidelines - General Approach to Initial Assessment and Documentation (9792.20. MTUS July 18, 2009 page 3 and ACOEM Practice Guidelines, 2nd Edition (2004), Chapter 2).

**Decision rationale:** Records reviewed indicate that this patient has suffered trauma to teeth that required extensive restorative treatment, as a result patient states her bite shifted and her teeth have moved since the accident. Treating dentist states changes in occlusion have occurred secondary to work accident and orthodontic relapse. However, the clinical information provided is insufficient to medically necessitate 16 periodic orthodontic visits. First, there must be a dental re-evaluation performed to determine any ongoing needs. 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 IMR reviewer does not believe this has been met in this case. This IMR reviewer recommends non-certification at this time.

**Pre-orthodontic visit:** Overturned

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

**MAXIMUS guideline:** Decision based on MTUS ACOEM Page(s): Chapter 7, p. 127.

**Decision rationale:** Records reviewed indicate that this patient has suffered trauma to teeth that required extensive restorative treatment, as a result patient states her bite shifted and her teeth have moved since the accident. Treating dentist states changes in occlusion have occurred secondary to work accident and orthodontic relapse. Recommendations include orthodontic treatment to improve patient's occlusion. Per medical reference mentioned above, "the occupational health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial factors are present, or when the plan or course of care may benefit from additional expertise." Therefore, this reviewer finds this request for pre-orthodontic visit to be medically necessary to address this patient's dental complaints. The pre-orthodontic visit will further benefit her.