

Case Number:	CM14-0142619		
Date Assigned:	10/13/2014	Date of Injury:	03/07/2001
Decision Date:	11/26/2014	UR Denial Date:	08/25/2014
Priority:	Standard	Application Received:	09/03/2014

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 licensed 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 medical records reviewed indicate that this 52 year old male patient was employed by the [REDACTED] as a Bellman and Driver for approximately five years, working five days a week and forty hours a week with job duties of driving a shuttle to drop off and pick up hotel guests from the airport and carry and deliver luggage to their rooms. The patient states on 03/07/2001 while he was lifting a luggage bag; he felt a popping sound in his back followed by immediate pain in his back subsequently requiring comprehensive medical treatment. By history, as a result of his injuries; patient required multiple surgeries involving his neck, left and right shoulders requiring the chronic use of multiple medications including opiate-pain medications. As a result of his medications, especially due to the chronic use of opiate medications; He presents with significant dental decay due to the effects of Medicine-Induced Xerostomia requiring treatment. Treating dentist [REDACTED] states in his report dated 08/15/14: "Intra-oral tissues are within normal limits. Teeth numbers 9, 16, 19, 30 and 32 are missing. Tooth number 31 is hopelessly mobile with generalized sub-gingival root decay. Tooth number 7 is hopelessly decayed. Teeth numbers 1, 2, 3, 5, 8, 10, 11, 12, 13, 14, 15, 16, 17, 18, 20, 21, 22, 23, 24, 25, 26, 27, 28 and 29 are moderately decayed. The diagnoses are multiple decayed 1, 2, 3, 5, 8, 10, 11, 12, 13, 14, 15, 16, 17, 18, 20, 21, 22, 23, 24, 25, 26, 27, 28 and 29 and hopeless teeth numbers 7 and 31 - decayed due the effects of medicine-induced Xerostomia and swollen, infected (with exudate) and bleeding gingiva - generalized - due to periodontal disease associated with bacteria-laden osseous bone loss due to the effects of medicine-induced Xerostomia. With reasonable medical/dental probability, in my opinion; there is a high propensity that the use of pain medications, especially opiate-based pain medications prescribed over the years, have played a direct role in decaying the teeth, periodontal and osseous tissues in [REDACTED] dentition due to the effects of Medicine-Induced Xerostomia. Due to the aggressiveness of this type of decay on

the periodontal gum-line together with the loss of supporting bone; the only viable option for teeth 7 and 31 is surgical extraction with osseous bone graft, dental implant placements with implant retained crowns and abutments with an interim partial denture to be worn during healing for teeth numbers 7, 9 and 30, and surgical extractions of teeth numbers 1, 16 and 17. Due to the lack of adequate tooth structure to adequately anchor [REDACTED] crown placements; surgical crown lengthening will be required for teeth numbers 6, 8, 10, 11, 22, 23, 24, 25, 26 and 27, endodontic root canal therapy will be required for teeth numbers 11, 12 and 22, crown placements including core build-ups and gingivectomies for teeth numbers 2, 3, 5, 8, 10, 11, 12, 13, 14, 18, 21, 22, 23, 24, 25, 26, 27, 28 and 29 and resin-composite filling for tooth number 20." UR report dated 09/09/14 states: "These teeth are being lost due to ongoing chronic periodontitis. These teeth appear to be chemically abraded and it does not look like rampant decay due to xerostomia. There are other factors causing this erosion which goes beyond xerostomia and decay. Therefore, the request is not certified."

IMR ISSUES, DECISIONS AND RATIONALES

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

Surgical extraction of teeth 7, 31 with osseous bone graft, dental implant placements with implant retained crowns, abutments with interim partial denture to be worn during healing for teeth numbers 7, 9, and 30 and surgical extractions of teeth numbers 1, 16, and 17: 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 (updated 8/11/14)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Head (updated 06/04/13)

Decision rationale: Per the Official Disability Guidelines Head Chapter, "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." Based on the treating dentist [REDACTED] objective findings and causation all mentioned above and the aggressiveness of the decay, this IMR reviewer finds this dental request to be medically necessary.

Surgical crown lengthening will required for teeth numbers 6, 8, 10, 11, 22, 23, 24, 26, 27, endodontic root canal therapy for teeth 11, 12, 22, crown placement including core build ups and gingivectomies for teeth numbers 2, 3, 5, 8, 10, 11, 12, 13, 14, 15, 18, 21, 22, 23, 24, 25, 26, 27, 28, 29,: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://ncbi.nlm.nih.gov/pubmed/15515347> osseous surgery for crown lengthening: a 6 month clinical

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Head (updated 06/04/13)

Decision rationale: Per the Official Disability Guidelines Head Chapter, "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. If part of the tooth is lost, but the pulp is not irrevocably damaged, a porcelain veneer or crown may be used. If the pulp has been seriously damaged, the tooth will require root canal treatment before a crown."Based on the treating dentist [REDACTED] objective findings and causation all mentioned above and the aggressiveness of the decay, this IMR reviewer finds this dental request to be medically necessary.