

Case Number:	CM15-0108158		
Date Assigned:	06/15/2015	Date of Injury:	06/28/2004
Decision Date:	10/08/2015	UR Denial Date:	06/02/2015
Priority:	Standard	Application Received:	06/04/2015

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 54 year old male, who sustained an industrial injury on 06/28/2004. The injured worker was noted to fall into a 3 ft. ditch and injured his neck, shoulders, and back. On provider visit dated 05/01/2013 injured worker has reported teeth breaking and rotting. Dry mouth from pain medication was noted. On examination tenderness was noted over the temporomandibular joints, oral mucosa was dry and with very minimal saliva. Teeth # 1, 2, 5, 17, 19 and 30 were missing. Root tip on # 3, 4, 7, 12, 13, 14, 25 and 31. Decay #6, 8, 9, 10, 15, 18, 20, 21, 22, 27, 28, and 29. Impacted #16 and 32. Sound teeth # 11, 23, and 24. The diagnoses have included gingivitis. The provider on 01/26/2014 requested Implant in position of #19, 29, and 30, surgical guide stents for the lower implants, extract all upper teeth and teeth #18-29-30 and 31. 4 implant in the upper arch, second upper implant denture, second upper implant denture, restore implants #19-29 and 30 with custom abutments and crowns, dental prophylaxis cleaning be performed on a 4 month basis with accompanying fluoride treatment, composite restoration on teeth #20, 21, 22, 25, 26, 27 and 28. Possible root canal treatments-build up and crowns on some or all teeth, placements of locators, fabricate a full immediate denture and soft issue reline a few months after teeth extraction. AME report of [REDACTED] dated 05/01/13 states that patient has suffered from pain, which has caused clenching and grinding of his teeth and he has also had problems with withdrawal from his medications that has caused clenching and grinding of his teeth. Patient has been under significant stress which has also contributed to his teeth clenching and grinding, that is clinically demonstrated by the heavy tooth wear. [REDACTED] states that patient's dental caries due to his dry mouth would be a

compensable consequence to taking the medications which have dry mouth side effects. AME has recommended dental restoration to include implants, crowns, multiple extract, composite restorations and temporary immediate full upper denture and permanent implant supported denture.

IMR ISSUES, DECISIONS AND RATIONALES

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

Implants in the position of #19, 29 and 30: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Online Version, Head Chapter, Dental Treatment.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Head Dental trauma treatment (facial fractures).

Decision rationale: Records reviewed indicate patient has dry mouth from pain medication was noted. AME dentist has found the dental caries due to his dry mouth industrially related. On examination tenderness was noted over the temporomandibular joints, oral mucosa was dry and with very minimal saliva. Teeth # 1, 2, 5, 17, 19 and 30 were missing. Root tip on # 3, 4, 7, 12, 13, 14, 25 and 31. Decay # 6, 8, 9, 10, 15, 18, 20, 21, 22, 27,28, and 29. Impacted #16 and 32. Per reference mentioned above, "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...Rather than resting on the gum line like removable dentures, or using adjacent teeth as anchors like fixed bridges, dental implants are long-term replacements. The goal of replacing missing teeth while respecting otherwise untouched tooth structure and the avoidance of crown reduction in bridge preparation make the use of dental implants an option for restoring traumatic tooth loss." Therefore, based on the records reviewed, medical reference and findings mentioned above, this reviewer finds this request for Implants in the position of #19, 29 and 30 medically necessary to properly repair and replace this patient's teeth and restore his chewing ability.

Surgical guide stents for the lower implants: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Online Version, Head Chapter, Dental Treatment.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Natl J Maxillofac Surg. 2010 Jan-Jun; 1(1): 20-23. doi: 10.4103/0975-5950.69153 PMID: PMC3304186. Role of surgical stents in determining the position of implants U. S. Pal, Pooran Chand,1 Neeraj Kumar Dhiman, R. K. Singh, and Vimlesh Kumar.

Decision rationale: Records reviewed indicate patient has dry mouth from pain medication was noted. AME dentist has found the dental caries due to his dry mouth industrially related. On examination tenderness was noted over the temporomandibular joints, oral mucosa was dry and with very minimal saliva. Teeth # 1, 2, 5, 17, 19 and 30 were missing. Root tip on # 3, 4, 7, 12,

13, 14, 25 and 31. Decay # 6, 8, 9, 10, 15, 18, 20, 21, 22, 27, 28, and 29. Impacted #16 and 32. Dentist is recommending surgical guide stents for the lower implants. Per reference mentioned above, "study shows the extreme accuracy of this surgical stents in implant installation in terms of position and diameter." Therefore, based on the records reviewed, medical reference and findings mentioned above, this reviewer finds this request for Surgical guide stents for the lower implants medically necessary

Extract all upper teeth and teeth #18, 29, 30 and 31: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Online Version, Head Chapter, Dental Treatment.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Head Dental trauma treatment (facial fractures).

Decision rationale: Records reviewed indicate patient has dry mouth from pain medication was noted. AME dentist has found the dental caries due to his dry mouth industrially related. On examination tenderness was noted over the temporomandibular joints, oral mucosa was dry and with very minimal saliva. Teeth # 1, 2, 5, 17, 19 and 30 were missing. Root tip on # 3, 4, 7, 12, 13, 14, 25 and 31. Decay # 6, 8, 9, 10, 15, 18, 20, 21, 22, 27, 28, and 29. Impacted #16 and 32. Dentist is recommending extract all upper teeth and teeth #18, 29, 30 and 31. Per reference mentioned above, "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...Rather than resting on the gum line like removable dentures, or using adjacent teeth as anchors like fixed bridges, dental implants are long-term replacements. The goal of replacing missing teeth while respecting otherwise untouched tooth structure and the avoidance of crown reduction in bridge preparation make the use of dental implants an option for restoring traumatic tooth loss." (ODG) Also per reference mentioned above, "there are circumstances in which it is clear that a tooth must be extracted, such as the following: A tooth that cannot be restored, because of severe caries." (Talib Najjar) Therefore, based on the records reviewed, medical reference and findings mentioned above, this reviewer finds this request for Extract all upper teeth and teeth #18, 29, 30 and 31 medically necessary to properly repair and replace this patient's teeth and restore his chewing ability.

4 Implants in the upper arch: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Online Version, Head Chapter, Dental Treatment.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Head Dental trauma treatment (facial fractures).

Decision rationale: Records reviewed indicate patient has dry mouth from pain medication was noted. AME dentist has found the dental caries due to his dry mouth industrially related. On examination tenderness was noted over the temporomandibular joints, oral mucosa was dry and with very minimal saliva. Teeth # 1, 2, 5, 17, 19 and 30 were missing. Root tip on # 3, 4, 7, 12,

13, 14, 25 and 31. Decay # 6, 8, 9, 10, 15, 18, 20, 21, 22, 27, 28, and 29. Impacted #16 and 32. Dentist is recommending 4 implants in the upper arch. Per reference mentioned above, "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...Rather than resting on the gum line like removable dentures, or using adjacent teeth as anchors like fixed bridges, dental implants are long-term replacements. The goal of replacing missing teeth while respecting otherwise untouched tooth structure and the avoidance of crown reduction in bridge preparation make the use of dental implants an option for restoring traumatic tooth loss." Therefore, based on the records reviewed, medical reference and findings mentioned above, this reviewer finds this request for 4 Implants in the upper arch medically necessary to properly repair and replace this patient's teeth and restore his chewing ability.

Second upper implant denture: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Online Version, Head Chapter, Dental Treatment.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Head Dental trauma treatment (facial fractures).

Decision rationale: Records reviewed indicate patient has dry mouth from pain medication was noted. AME dentist has found the dental caries due to his dry mouth industrially related. On examination tenderness was noted over the temporomandibular joints, oral mucosa was dry and with very minimal saliva. Teeth # 1, 2, 5, 17, 19 and 30 were missing. Root tip on # 3, 4, 7, 12, 13, 14, 25 and 31. Decay # 6, 8, 9, 10, 15, 18, 20, 21, 22, 27, 28, and 29. Impacted #16 and 32. Dentist is recommending Second upper implant denture. Per reference mentioned above, "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." Therefore, based on the records reviewed, medical reference and findings mentioned above, this reviewer finds this request for upper implant denture medically necessary to properly repair and replace this patient's teeth and restore his chewing ability.

Restore implants #19, 29 and 30 with custom abutments and crowns: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Online Version, Head Chapter, Dental Treatment.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Head Dental trauma treatment (facial fractures).

Decision rationale: Records reviewed indicate patient has dry mouth from pain medication was noted. AME dentist has found the dental caries due to his dry mouth industrially related. On examination tenderness was noted over the temporomandibular joints, oral mucosa was dry and with very minimal saliva. Teeth # 1, 2, 5, 17, 19 and 30 were missing. Root tip on # 3, 4, 7, 12, 13, 14, 25 and 31. Decay # 6, 8, 9, 10, 15, 18, 20, 21, 22, 27, 28, and 29. Impacted #16 and 32. Dentist is recommending to restore implants #19, 29 and 30 with custom abutments and crowns. Per reference mentioned above, "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." Therefore, based on the records reviewed, medical reference and findings mentioned above, this reviewer finds this request for Implants #19, 29 and 30 medically necessary to properly repair and replace this patient's teeth and restore his chewing ability.

Dental prophylaxis cleaning be performed on a 4 month basis w/accompanying fluoride treatments: 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), Online Version, Head Chapter, Dental Treatment.

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 Periodontol 2011 Jul; 82(7): 943-9. [133 references].

Decision rationale: Records reviewed indicate patient has dry mouth from pain medication was noted. AME dentist has found the dental caries due to his dry mouth industrially related. On examination tenderness was noted over the temporomandibular joints, oral mucosa was dry and with very minimal saliva. Teeth # 1, 2, 5, 17, 19 and 30 were missing. Root tip on # 3, 4, 7, 12, 13, 14, 25 and 31. Decay # 6, 8, 9, 10, 15, 18, 20, 21, 22, 27, 28, and 29. Impacted #16 and 32. Dentist is recommending dental prophylaxis cleaning on a 4 month basis. However, even though dental cleaning maybe medically necessary for this patient at this time, but an indefinite request for every 4 months is not medically necessary. First, there must be a dental re-evaluation performed to determine any ongoing needs. Per reference mentioned above, "periodontal evaluation and risk factors should be identified at least on an annual basis".

Composite restoration on teeth #20, 21, 22, 25, 26, 27 and 28: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Online Version, Head Chapter, Dental Treatment.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Head Dental trauma treatment (facial fractures) Recommended.

Decision rationale: Records reviewed indicate patient has dry mouth from pain medication was noted. AME dentist has found the dental caries due to his dry mouth industrially related. On examination tenderness was noted over the temporomandibular joints, oral mucosa was dry and with very minimal saliva. Teeth # 1, 2, 5, 17, 19 and 30 were missing. Root tip on # 3, 4, 7, 12, 13, 14, 25 and 31. Decay # 6, 8, 9, 10, 15, 18, 20, 21, 22, 26, 27, 28, and 29. Impacted #16 and 32. Dentist is recommending composite restoration on teeth #20, 21, 22, 25, 26, 27 and 28. Based on the records reviewed, medical reference and dental caries/findings mentioned above, this reviewer finds this request for Composite restoration on teeth #20, 21, 22, 25, 26, 27 and 28 medically necessary to properly repair this patient's teeth and restore his chewing ability.

Possible root canal treatments, build-ups and crowns on some or all teeth: 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), Online Version, Head Chapter, Dental Treatment.

MAXIMUS guideline: Decision based on MTUS General Approaches 2004, Section(s): General Approach to Initial Assessment and Documentation, and Chronic Pain Medical Treatment 2009, Section(s): Introduction.

Decision rationale: Records reviewed indicate patient has dry mouth from pain medication was noted. AME dentist has found the dental caries due to his dry mouth industrially related. On examination tenderness was noted over the temporomandibular joints, oral mucosa was dry and with very minimal saliva. Teeth # 1, 2, 5, 17, 19 and 30 were missing. Root tip on # 3, 4, 7, 12, 13, 14, 25 and 31. Decay # 6, 8, 9, 10, 15, 18, 20, 21, 22, 26, 27, 28, and 29. Impacted #16 and 32. Dentist is recommending Possible root canal treatments, build-ups and crowns on some or all teeth. However this is a non specific request and there are insufficient documentation in the records provided to medically justify for this root canal treatments, build-ups and crowns on some or all teeth. It's unclear to this reviewer which teeth will need this dental treatment. 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 for this request. This reviewer recommends non-certification at this time. The request is not medically necessary.

Placements of locators: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Online Version, Head Chapter, Dental Treatment.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Head Dental trauma treatment (facial fractures).

Decision rationale: Records reviewed indicate patient has dry mouth from pain medication was noted. AME dentist has found the dental caries due to his dry mouth industrially related. On examination tenderness was noted over the temporomandibular joints, oral mucosa was dry and with very minimal saliva. Teeth # 1, 2, 5, 17, 19 and 30 were missing. Root tip on # 3, 4, 7, 12, 13, 14, 25 and 31. Decay # 6, 8, 9, 10, 15, 18, 20, 21, 22, 26, 27, 28, and 29. Impacted #16 and

32. Dentist is recommending placements of locators. Since an implant retained denture has been authorized, therefore Locators are medically necessary for the denture to properly attach to the implants. Per reference mentioned above "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."

Fabricate a full upper immediate denture: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Online Version, Head Chapter, Dental Treatment.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Head Dental trauma treatment (facial fractures).

Decision rationale: Records reviewed indicate patient has dry mouth from pain medication was noted. AME dentist has found the dental caries due to his dry mouth industrially related. On examination tenderness was noted over the temporomandibular joints, oral mucosa was dry and with very minimal saliva. Teeth # 1, 2, 5, 17, 19 and 30 were missing. Root tip on # 3, 4, 7, 12, 13, 14, 25 and 31. Decay # 6, 8, 9, 10, 15, 18, 20, 21, 22, 27, 28, and 29. Impacted #16 and 32. Dentist is recommending to fabricate a full upper immediate denture. Per reference mentioned above, "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." Therefore, based on the records reviewed, medical reference and findings mentioned above, this reviewer finds this request for Fabricate a full upper immediate denture medically necessary to properly repair and replace this patient's teeth and restore his chewing ability.

Soft tissue reline a few months after teeth extraction: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Online Version, Head Chapter, Dental Treatment.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Head Dental trauma treatment (facial fractures).

Decision rationale: Records reviewed indicate patient has dry mouth from pain medication was noted. AME dentist has found the dental caries due to his dry mouth industrially related. On examination tenderness was noted over the temporomandibular joints, oral mucosa was dry and with very minimal saliva. Teeth # 1, 2, 5, 17, 19 and 30 were missing. Root tip on # 3, 4, 7, 12, 13, 14, 25 and 31. Decay # 6, 8, 9, 10, 15, 18, 20, 21, 22, 27, 28, and 29. Impacted #16 and 32. Dentist is recommending soft tissue reline a few months after teeth extraction. Per reference mentioned above, "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." Also, "Alveolar ridge bone resorption is a biologic phenomenon that occurs following tooth extraction and cannot be prevented." (Jamjoom, 2015) Therefore, based on the records reviewed, medical reference and findings mentioned above, this reviewer finds this request for soft tissue reline a few months

after teeth extraction medically necessary to properly repair and replace this patient's teeth and restore his chewing ability.