

STATE OF MICHIGAN
DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES
Before the Director of Insurance and Financial Services

In the matter of:

██████████
Petitioner

v

File No. 151405-001

Guardian Life Insurance Company of America
Respondent

Issued and entered
this 25th day of January 2016
by **Randall S. Gregg**
Special Deputy Director

ORDER

I. PROCEDURAL BACKGROUND

On December 21, 2015, ██████████, dentist and authorized representative of ██████████ (Petitioner), filed a request with the Director of Insurance and Financial Services for an external review under the Patient's Right to Independent Review Act, MCL 550.1901 *et seq.*

The Petitioner has dental coverage through a group plan underwritten by Guardian Life Insurance Company of America (Guardian). The Director notified Guardian of the external review request and asked for the information used to make its final adverse determination. Guardian furnished the information on December 28, 2015. After a preliminary review of the material submitted, the Director accepted the request for review on December 30, 2015.

To address the medical issues in the case, the Director assigned it to an independent medical review organization which provided its analysis and recommendation on January 14, 2016.

II. FACTUAL BACKGROUND

On September 21, 2015, the Petitioner had a crown buildup (also known as a core buildup) on tooth #2. Guardian denied coverage for the procedure.

The Petitioner appealed the denial through Guardian's internal appeals process. At the conclusion of that process, Guardian affirmed its decision in a final adverse determination issued December 1, 2015. The Petitioner now seeks the Director's review of that final adverse determination.

III. ISSUE

Did Guardian correctly deny coverage for the Petitioner's crown build up on tooth #2?

IV. ANALYSIS

Respondent's Argument

In its final adverse determination, Guardian stated that coverage was denied because tooth #2 "appears to have sufficient tooth structure remaining to provide adequate support and retention for an inlay, onlay or crown."

Petitioner's Argument

In the request for external review, the Petitioner's authorized representative wrote:

There was much more decay eating around the old amalgam restoration than what appears on the pre-operative x-ray. I have enclosed pre and post operative x-rays as well as intraoral photos of the core in place. It seems clear to me that the decay encompassed the majority of the tooth leaving the external walls so thin that a crown is necessary. Further, preparation of the tooth for the crown will cut away most of the remaining tooth structure leaving insufficient tooth structure to retain the crown. Thus the standard of care would be to place the core filling as was done. Please require payment of this service.

Director's Review

The Guardian certificate of coverage provides benefits for crown buildups as "major restorative services." The coverage is described on page 81 of the certificate:

Crowns, inlays, onlays, labial veneers, and crown buildups are covered only when needed because of decay or injury, and only when the tooth cannot be restored with amalgam or composite filling material....Post and cores are covered only when needed due to decay or injury...

* * *

Posts and buildups – only when done in conjunction with a covered unit of crown or bridge and only when necessitated by substantial loss of natural tooth structure.

The question of the dental/medical necessity of the crown buildup on tooth #2 was presented to an independent review organization (IRO) for analysis as required by section 11(6) of the Patient's Right to Independent Review Act, MCL 550.1911(6).

The IRO reviewer is licensed in General Dentistry and is in active practice. The IRO reviewer's report included the following analysis and recommendation:

The standard of care in the instance where a crown is to be placed is to determine if a core buildup is medically necessary. It is commonly held that if 50% or more of the coronal tooth structure is missing, that a core buildup should be considered. (1) Generally if the entire buccal or lingual structure is substantially damaged, amounting to about 50% or more of the original structure, there would be insufficient height of opposing walls to allow for proper retention of the crown restoration. Wiscott describes the need for sufficient height of opposing walls of a preparation to allow for proper retention. (2) Christensen states in his publication that buildups should be considered when more than 50% of the coronal structure of a tooth is missing in order to increase retention. (1)

The American Dental Association (ADA) descriptor states "CDT 2014 D2950 - Core Buildup, Including Any Pins refers to the building up of coronal structure when there is insufficient retention for a separate extracoronary restorative procedure. A core buildup is not a filler to eliminate any undercut, box form, or concave irregularity in a preparation." Wiscott notes the need for 3- 4 mm of height on opposing surfaces to allow for sufficient retention of an indirect restoration. (2) Christensen has stated "When one-half or more of the coronal tooth structure is missing, building up the tooth preparations by placing bonded composite is the state of the art..." but goes on to state regarding simple fillers that, "small voids in the tooth preparation produced by removal of previously placed restorations should be filled with resin-modified glass ionomer, bonded compomer or bonded resin-based composite to allow impression material to release easily from the tooth preparation." (1) Although there has to be adequate retention for a crown, there does not have to be absolute restoration of the original form of the tooth to achieve this.

In the current instance, per the documentation submitted for review, the photograph shows a fully intact mesiolingual (ML) cusp, a partially intact distolingual (DL) cusp, and a large central area restored with a blue core buildup extending down the DL groove. The x-ray reveals a pin that had been placed to aid in retention of the core. There was a substantial loss of structure due to recurrent decay under the old amalgam restoration as the provider had indicated; however, the loss of coronal structure was less than 50% missing structure, which is commonly used as a guideline to suggest a need for a core buildup. There was a non-involved mesiolingual cusp present. Although there was substantial depth of cavity preparation, there was sufficient buccal, distal and mesial structure to allow for at least 3 - 4 mm of opposing wall height, as suggested by Wiscott as being sufficient for adequate retention. (2) There was sufficient height of opposing walls to allow for adequate retention of a crown restoration. Although the provider did place a retention pin and core buildup, the

remaining structure would have been sufficient to provide adequate retention for a crown restoration without a core being placed. For these reasons, the core filling was not medically necessary for this enrollee.

1. Christensen GJ. Frequently encountered errors in tooth preparation for crowns. *JADA*. 2007 Oct; 138(10): 1373-1375
2. Wiskott HW. Fixed Prosthodontics: Principles and Clinics. Quintessence Pub. 2011. Pages 309-311.

The Director is not required to accept the IRO's recommendation. *Ross v Blue Care Network of Michigan*, 480 Mich 153 (2008). However, the recommendation is afforded deference by the Director; in a decision to uphold or reverse an adverse determination the Director must cite "the principal reason or reasons why the [Director] did not follow the assigned independent review organization's recommendation." MCL 550.1911(16)(b). The IRO's recommendation here is based on experience, expertise, and professional judgment. Furthermore, it is not contrary to any provision of the certificate of coverage. MCL 550.1911(15).

The Director, discerning no reason why the IRO's recommendation should be rejected, finds that the crown buildup on tooth #2 was not dentally/medically necessary and is therefore not a covered benefit.

V. ORDER

The Director upholds Guardian Life Insurance Company of America's December 1, 2015, final adverse determination. Guardian is not required to provide coverage for the Petitioner's core buildup on tooth #2.

This is a final decision of an administrative agency. Under MCL 550.1915, any person aggrieved by this order may seek judicial review no later than 60 days from the date of this order in the circuit court for the Michigan county where the covered person resides or in the circuit court of Ingham County. A copy of the petition for judicial review should be sent to the Department of Insurance and Financial Services, Office of General Counsel, Post Office Box 30220, Lansing, MI 48909-7720.

Patrick M. McPharlin
Director

For the Director



Randall S. Gregg
Special Deputy Director