KAISER PERMANENTE®	**Northwest Region Utilization Review UR 49: Temporomandibular Disorders (TMD) Surgical Intervention Medical Necessity Criteria**
Department: Utilization Review Applies to: Kaiser Permanente NW Region Review Responsibility: UROC Subject Matter Experts: Dana Smith, MD; Kelly Dezura, DMD	Original Date 4/08 Last Reviewed/Revised: 10/23, 10/24, 10/25

Medical necessity criteria are applied only after member eligibility and benefit coverage is determined. Questions concerning member eligibility and benefit coverage need to be directed to Membership Services.

SURGICAL INTERVENTION MEDICAL NECESSITY CRITERIA

DEFINITIONS

Temporo-mandibular Disorders (TMD) are muscular-skeletal disorders that are medical, not dental, in nature.

Temporomandibular disorders (TMD) are a heterogeneous group of pathologies affecting the temporomandibular joints, the masticatory muscles, or both. The most frequent signs and symptoms are pain or tenderness in the preauricular area or in the masticatory muscles, an alteration of the range of joint motion, and articular sounds, such as click or crepitus, during mandibular movements. For diagnostic purposes, TMD has been classified into 3 groups: muscle disorders, internal derangement (disk displacement), and other joint disorders, such as arthralgia, osteoarthritis, and osteoarthrosis. Anxiety, depression, somatization disorders, and headaches have been associated with TMD symptoms.

POLICY

TMD treatment is non-dental, non-orthodontic, non-occlusal and generally non-surgical in its approach. Characteristics of TMD:

A. TM Joint popping; clicking; grinding; catching; and locking
B. Facial pain that is not tooth related and is aggravated with use of the jaw
C. Facial pain which appears related to clenching and bruxing

Diagnostic tests that may help identify TMD:

1. Range of motion (ROM): Restricted; deviates; pain active and/or passive; limited lateral motion; roughness of motion.
2. Compressive loading—biting on tongue blade, first one side, then the contralateral side.
3. Resistive loading—asking the patient to hold, in turn, the variety of mouth positions against resistance provided by the examiner's hand.
4. Palpation over lateral poles and intra-meatally to elicit pain and/or determine irregularities

Coverage guidance: Surgical interventions for temporomandibular disorder may be excluded from coverage. Check for exclusions or limitations.

Source	Policy
For Medicare Members	
CMS Coverage Manuals	None
National Coverage Determinations (NCD)	None
Local Coverage Determinations (LCD)	None
Local Coverage Article	None
Kaiser Permanente Medical Policy for Medicare Members	UR 49 applies. Due to the absence of a NCD, LCD, or other coverage guidance, "Temporomandibular Disorders Surgical Intervention Criteria" for medical necessity determinations will be applied.
For Medicaid Members	
OR Medicaid	UR 49 does not apply. Check Linefinder.
WA Medicaid	UR 49 does not apply. Use Molina's definition for medical necessity.
Commercial and Self-Funded Members	
OR Commercial	UR 49 applies
WA Commercial	UR 49 applies
Self-Funded Plans	UR 49 applies

MEDICAL NECESSITY CRITERIA

Surgical intervention is a consideration when pain and dysfunction are persistent and the following are unresponsive to the non-surgical treatments below:

1. recurring and/or persistent lock of TM joint
2. persistent painful popping of TM joint
3. Osteoarthritis of TM joint

OTHER CONSIDERATIONS

Non-surgical treatments to consider prior to surgical intervention:

1. Physical therapy- rest and reassurance; exercise; stretching; use of heat and cold; avoidance of aggravating factors
2. Analgesics, anti-inflammatory medications
3. Soft diet (nothing firmer than consistency of scrambled eggs)
4. Moist heat if muscle; cold, if joint
5. Bite splints

CLINICAL

ADA Presidents Council Guidelines
Guidelines of Oregon and Washington State Board of Dentistry