

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. 150205-001

Guardian Life Insurance Company of America  
Respondent

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Issued and entered  
this 18<sup>th</sup> day of November 2015  
by Joseph A. Garcia  
Special Deputy Director

**ORDER**

**I. PROCEDURAL BACKGROUND**

On October 20, 2015, ██████████, DDS, 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 October 21, 2015. After a preliminary review of the material submitted, the Director accepted the request on October 27, 2015.

To address the medical issues in the case, the Director assigned the matter to an independent medical review organization which provided its analysis and recommendation on November 11, 2015.

**II. FACTUAL BACKGROUND**

On July 13, 2015, the Petitioner had a crown buildup (also known as a core buildup) and a crown placed on tooth #10. Guardian denied coverage for both procedures on the basis that the services were not medically necessary.

The Petitioner appealed the benefit decision through Guardian's internal appeals process. At the conclusion of that process, Guardian affirmed its decision in a final adverse determination

issued September 19, 2015. The Petitioner now seeks a review of that adverse determination from the Director.

### III. ISSUE

Did Guardian correctly deny authorization for the Petitioner's crown buildup and crown on tooth #10?

### IV. ANALYSIS

#### Respondent's Argument

In its final adverse determination, Guardian cited two reasons for denying coverage:

- This tooth appears to have sufficient tooth structure remaining to provide adequate support and retention for an inlay, onlay or crown.
- This tooth does not appear to have decay or injury that would require a crown or veneer and that this restoration is being placed to correct congenital or developmental malformations. The dental plan only covers crowns, inlays, onlays and veneers when needed due to decay or injury and when the tooth cannot be restored with a routine filling.

#### Petitioner's Argument

On the request for external review form, the Petitioner's representative wrote:

Patient has have several bondings on tooth#10 all of which have fractured or come off. The inadequate tooth structure necessitates full crown coverage. We are seeking insurance reimbursement for covered service.

#### Director's Review

The certificate of coverage, on page 37, describes the circumstances under which coverage is available for crowns which the certificate classifies as major restorative services:

Crowns, inlays, onlays, labial veneers, and crown build-ups 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 whether the crown buildup and crown on tooth #10 were medically/dentally necessary 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 clinical practice. The IRO report included the following analysis:

The standard of care when evaluating the need for a crown is to evaluate the amount of missing structure and the risk of fracture. The need for a core buildup is determined by assessing the remaining structure required to retain a crown which does not equate with replacing all the damaged structure. Christensen has stated in the Journal of the American Dental Association (JADA) that, "For anterior teeth, my observations show that the need for crowns is related to teeth that are missing at least one-half of the coronal tooth structure because of caries or previously placed defective restorations. The location of the remaining tooth structure is not predictable and can be any coronal one-half of the clinical crown." [Christiansen GJ. Too Many Crowns. JADA. 2013 Oct; 144(10): 1174-1176] The code descriptor for core buildup states that code D2950 - Core Buildup, Including Any Pins, refers to building up of coronal structure when there is insufficient retention for a separate extra coronal restorative procedure. A core buildup is not a filler to eliminate any undercut, box form, or concave irregularity in a preparation. It is clear that this enrollee did not have any significant missing structure, only that there had been failed bondings used to alter the cosmetic appearance of the tooth. A buildup would not be necessary for this enrollee even if a cosmetic crown was being placed, as there is sufficient remaining structure for retention of a crown.

Crowns and their indications are discussed in the JADA article "Too Many Crowns" by Gordon Christensen. He also discusses the situations suggesting the need for core buildups in another article "Frequently Encountered Errors in Tooth Preparations for Crowns." [JADA. 2007 Oct; 138(10): 1373-1375] Wiscott discusses required height of opposing walls needed for retention. [Wiscott HW. Fixed Prosthodontics, Principles and Clinics. Quintessence Pub Co. 2011]

The enrollee presented with a heavily restored tooth #10 that had failure of prior restorations on the upper left lateral incisor. The history of the case was that the prior attempted bondings had come off. A high quality x-ray was supplied that shows the intact underlying enamel of the tooth and clearly shows that the filling material that was placed was to cosmetically correct the shape of the developmentally smaller peg lateral incisor. The need for a crown is evident when there is significant missing coronal structure, involving four surfaces of the tooth with about 50% of the incisal edge being compromised. Due to the obvious intact enamel of tooth #10 below the filling material and the altered contours made by the remaining bonded material, it is clear the bondings were placed to

cosmetically alter the appearance of the tooth. Although there had been prior failure of the bondings, a crown was not medically necessary in this instance for #10 as the bondings were placed only for cosmetic purposes due to the developmental malformation as evidenced by the intact enamel on x-ray. Therefore, based upon the documentation submitted for review and current dental literature, the crown (core) buildup and crown for tooth #10 was not medically necessary.

The IRO recommended that the denial of coverage be upheld. 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 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 can discern no reason why the IRO's recommendation should be rejected.

The Director finds that the crown buildup and crown on tooth #10 are not medically necessary.

#### V. ORDER

The Director upholds Guardian Life Insurance Company of America's September 19, 2015, final adverse determination.

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:



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Joseph A. Garcia  
Special Deputy Director