BlueCross BlueShield of Arizona
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MEDICAL COVERAGE GUIDELINES
SECTION: MEDICINE

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ORAL APPLIANCES AND ORAL SURGICAL SPLINTS

Coverage for services, procedures, medical devices and drugs are dependent upon benefit eligibility as outlined in the member's specific benefit plan. This Medical Coverage Guideline must be read in its entirety to determine coverage eligibility, if any.

The section identified as "Description" defines or describes a service, procedure, medical device or drug and is in no way intended as a statement of medical necessity and/or coverage.

The section identified as "Criteria" defines criteria to determine whether a service, procedure, medical device or drug is considered medically necessary or experimental or investigational.

State or federal mandates, e.g., FEP program, may dictate that any drug, device or biological product approved by the U.S. Food and Drug Administration (FDA) may not be considered experimental or investigational and thus the drug, device or biological product may be assessed only on the basis of medical necessity.

Medical Coverage Guidelines are subject to change as new information becomes available.

For purposes of this Medical Coverage Guideline, the terms "experimental" and "investigational" are considered to be interchangeable.

Description:

Oral Appliances:
Oral appliances are removable acrylic appliances worn over the teeth which are used for minimizing the effects of occlusal factors, treating temporomandibular joint (TMJ) diseases non-surgically and treating TMJ-related disorders such as capsulitis, myalgia, bruxism, oral dyskinesia and oral dystonia. They may be custom-made or not custom-made and purchased over-the-counter.

Oral appliances include, *but are not limited to:*

- Anterior bite stops
- Night guards
- Occlusal guards/splints
- Occlusal orthotic devices
- Nociceptive Trigeminal Inhibitors
- Nociceptive Trigeminal Inhibition Tension Suppression Systems (NTI-tss devices)

ORAL APPLIANCES AND ORAL SURGICAL SPLINTS (cont.)

Description: (cont.)

Oral Surgical Splints:
Oral surgical splints are used in association with oral surgical procedures. They are also used to treat TMJ diseases non-surgically and for treating TMJ-related disorders such as locked jaw, capsulitis, myalgia, oral dyskinesia and oral dystonia. To make or fabricate an oral surgical splint, an impression is made of the area and the physician customizes the splint from the cast model of the impression.

One oral surgical splint is described as either a mandibular (lower) splint or a maxillary (upper) splint. One or both may be used in the non-surgical treatment of TMJ diseases or the TMJ-related disorders listed above (i.e., locked jaw, etc.).

An oral surgical splint may also be known as:

- Flat lower splint
- Maxillary anterior repositioning splint
- Maxillary stabilization appliance
- Stabilization appliance

Criteria:

Oral Appliances:

For oral appliances for the treatment of obstructive sleep apnea syndrome or snoring, refer to BCBSAZ Medical Coverage Guideline, *"Diagnosis and Medical Management of Obstructive Sleep Apnea Syndrome"*.

- Custom made oral appliances for the non-surgical treatment of TMJ diseases and TMJ-related disorders are considered ***medically necessary***.

  TMJ-related disorders include *but are not limited to:*

  - Capsulitis
  - Myalgia
  - Bruxism
  - Oral dyskinesia
  - Oral dystonia

ORAL APPLIANCES AND ORAL SURGICAL SPLINTS (cont.)

Criteria: (cont.)

Oral Appliances: (cont.)

For oral appliances for the treatment of obstructive sleep apnea syndrome or snoring, refer to BCBSAZ Medical Coverage Guideline, *"Diagnosis and Medical Management of Obstructive Sleep Apnea Syndrome"*.

- Custom made oral appliances for the treatment of headaches, including migraine headaches, are considered ***experimental or investigational*** based upon:

  1. Insufficient evidence to support improvement of the net health outcome, and
  2. Insufficient evidence to support improvement of the net health outcome as much as, or more than, established alternatives.

- Non-custom made oral appliances obtained over-the-counter are a ***benefit plan exclusion*** and ***not eligible for coverage***.

Oral Surgical Splints:

Surgical Use:

For oral surgical splints for the treatment of obstructive sleep apnea syndrome or snoring, refer to BCBSAZ Medical Coverage Guideline, *"Diagnosis and Medical Management of Obstructive Sleep Apnea Syndrome"*.

For oral surgical splints used in association with orthognathic surgery, refer to BCBSAZ Medical Coverage Guideline, *"Orthognathic Surgery"*.

- An oral surgical splint is considered ***medically necessary*** with documentation that the splint is fabricated by the surgeon **and** used in association with an oral surgical procedure.

Non-Surgical Use:

- One oral surgical splint prescribed by a dental provider is considered ***medically necessary*** for the non-surgical treatment of TMJ disease or TMJ-related disorders:

  TMJ-related disorders include *but are not limited to:*

  - Locked jaw
  - Capsulitis
  - Bruxism
  - Myalgia
  - Oral dyskinesia
  - Oral dystonia

ORAL APPLIANCES AND ORAL SURGICAL SPLINTS (cont.)

Criteria: (cont.)

Oral Surgical Splints: (cont.)

Non-Surgical Use: (cont.)

For oral surgical splints for the treatment of obstructive sleep apnea syndrome or snoring, refer to BCBSAZ Medical Coverage Guideline, *"Diagnosis and Medical Management of Obstructive Sleep Apnea Syndrome"*.

- A second oral surgical splint within a six month period is considered ***medically necessary*** when a separate mandibular splint for daytime use is needed due to an individual's inability to wear a maxillary splint while speaking.

- Requests for more than one oral surgical splint within a six month period will be reviewed by the medical director(s) and/or clinical advisor(s).

- The following treatments for TMJ disease or TMJ-related disorders are considered ***not medically necessary*** based upon the procedure being inconsistent with the diagnosis submitted:

    1. More than one oral surgical splint within a six month period for the non-surgical treatment of TMJ disease or TMJ-related disorders that do not meet above criteria
    2. Oral surgical splint for all other indications not previously listed

Resources:

1. American Association of Oral and Maxillofacial Surgeons. American Association of Oral and Maxillofacial Surgeons Coding for Temporomandibular Surgery. 03/2006.

2. American Association of Oral and Maxillofacial Surgeons. American Association of Oral and Maxillofacial Surgeons Coding for Orthognathic Surgery. 03/2006.

3. American Association of Oral and Maxillofacial Surgeons. American Association of Oral and Maxillofacial Surgeons Coding for Trauma and Fractures. 03/2006.

4. American Association of Oral and Maxillofacial Surgeons. Coding Corner; Coding Update. *AAMOS Today.* 08/2006 2006:11.

ORAL APPLIANCES AND ORAL SURGICAL SPLINTS (cont.)

Resources: (cont.)

5. American Dental Association. 2007-2008 Current Dental Terminology (CDT).

6. External Consultant Review. External Consultant: Doctor of Dental Medicine. 05/14/2007.

7. External Consultant Review. External Consultant: Doctor of Dental Surgery, TMJ Specialist. 07/30/2010.

8. External Consultant Review. External Consultant: Doctor of Dental Surgery, TMJ Specialist. 08/30/2007.

9. Franco L, Rompre PH, de Grandmont P, Abe S, Lavigne GJ. A mandibular advancement appliance reduces pain and rhythmic masticatory muscle activity in patients with morning headache. *J Orofac Pain.* Summer 2011;25(3):240-249.

10. Ingenix. Coder's Desk Reference for Procedures. 2007.

11. Stapelmann H., Turp J. The NTI-tss Device for the Therapy of Bruxism, Temporomandibular Disorders, and Headache - Where Do We Stand? A Qualitative Systematic Review of the Literature. *BMC Oral Health.* 07/29/2008;8(22).

FDA 510K Summary for NTI Tension Suppression System:

- FDA-approved indication: To be used in the prophylactic treatment of medically diagnosed migraine pain as well as migraine associated tension-type headaches, by reducing their signs and symptoms through reduction of trigeminally innervated muscular activity, and; for the prevention of bruxism and TMJ syndrome through reduction of trigeminally innervated muscular activity.