

Medical Policy



Temporomandibular Joint Disorders

Policy Number: PG0432

Last Reviewed Date: 02/01/2025

Last Revised: 02/01/2025

HMO AND PPO

ELITE (MEDICARE ADVANTAGE)

MARKETPLACE

GUIDELINES:

- This policy does not certify benefits or authorization of benefits, which is designated by each individual policyholder terms, conditions, exclusions, and limitations contract. It does not constitute a contract or guarantee regarding coverage or reimbursement/payment. Self-Insured group specific policy will supersede this general policy when group supplementary plan document or individual plan decision directs otherwise.
- Paramount applies coding edits to all medical claims through coding logic software to evaluate the accuracy and adherence to accepted national standards.
- This medical policy is solely for guiding medical necessity and explaining correct procedure reporting used to assist in making coverage decisions and administering benefits.

SCOPE:

☒ Professional

☐ Facility

DESCRIPTION:

Temporomandibular joint disorders, commonly known as TMJ, are painful conditions that affect the articular joint and muscles that comprise the jaw. According to some estimates, the condition may affect as many as 10 million Americans. There are a variety of symptoms that may be linked to TMJ include pain in the chewing muscles; radiating pain involving the face, jaw, and neck; jaw stiffness; and/or locking or clicking/popping sounds while opening the mouth or chewing. Symptoms can be temporary, occurring only occasionally, or can become more chronic in nature.

The following three conditions are the most typical disorders of TMJ and associated muscles:

- Arthritis – Degenerative or inflammatory joint disorders that can affect the TMJ.
- Internal derangement – Involves a displaced disc, dislocated jaw, or injury to the condyle.
- Myofascial pain – Also called myofascial pain and dysfunction.

For many patients, symptoms of TMJ dysfunction are short-term and self-limiting. Conservative, nonsurgical treatments for TMJ disorders include, but not limited to the following: physical therapy, diet alteration, non-narcotic analgesics, nonsteroidal anti-inflammatory drugs (NSAIDs), muscle relaxants, tricyclic anti-depressants, adjustment of occlusion, removable oral appliances, and behavioral modification to correct habits such as clenching that aggravate TMJ. Conservative treatments are recommended prior to consideration of more invasive and/or permanent therapies such as surgery.

POLICY:

Paramount Commercial Insurance Plans and Elite (Medicare Advantage) Plans

- **Treatment of temporomandibular joint (TMJ) disorders does not require prior authorization when determined to be medically necessary as the medical criteria and guidelines shown below are met.**

COVERAGE CRITERIA

Paramount Commercial Insurance Plans and Elite (Medicare Advantage) Plans

Many medical plans do not cover orthodontic treatment provided as an adjunct to temporomandibular joint (TMJ) disorder surgery, because such treatment is considered dental in nature and therefore, not covered under the medical benefit. Treatment of temporomandibular joint (TMJ) disorder is generally excluded by contract. Please

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refer to the member's individual certificate.

COVERED:

Nonsurgical treatments considered **medically necessary** for temporomandibular disorders include the following:

1. Reversible, removable, intraoral appliances such as removable splints
2. Pharmacologic therapy (that is, analgesics, anti-inflammatory drugs, and muscle relaxants)
3. Physical therapy when qualifying criteria are met and not excluded by certify benefits or authorization of benefits,
4. Therapeutic injections

Surgical procedures considered **medically necessary** for temporomandibular disorders when ALL criteria listed below are met:

1. Arthrocentesis
2. Arthroscopic surgery
3. Manipulation for reduction or dislocation of the TMJ
4. Open surgical procedures, including arthroplasty, condylectomy, modified condylotomy, disc or meniscus plication, and disc removal when the temporomandibular disorder is the result of congenital anomalies, disease, or trauma
5. TMJ arthroplasty with prosthetic implants may be considered for U.S. Food and Drug Administration (FDA) approved prostheses only

Criteria for medical necessity of surgical procedures listed above:

1. Temporomandibular joint internal derangement or other structural joint disorder is documented as evidenced by BOTH of the following:
 - a. Completion of skeletal growth for individuals under age 18 with long bone x-ray or serial cephalometrics showing no change in facial bone relationships over the last three-to-six-month period (Note: individuals aged 18 and older do not require this documentation)
 - b. Computed tomography (CT), magnetic resonance imaging (MRI), diagnostic x-ray, tomograms, panoramic radiograph, or arthrograms of the temporomandibular joint document's joint pathology (for example, arthritis, bone cyst, fracture, meniscal abnormality, or tumors)
2. Temporomandibular joint pain is due to a maxillary or a mandibular skeletal deformity OR the individual has a clinically significant functional impairment refractory, to at least six months of non-surgical treatment to include at least ONE of the following:
 - a. Behavioral therapy
 - b. Pharmacologic therapy (that is, analgesics, nonsteroidal anti-inflammatory drugs, muscle relaxants)
 - c. Physical therapy
 - d. Reversible, removable, intraoral appliances such as removable splints
 - e. Therapeutic injections

Coverage Limitations:

The following nonsurgical treatments are considered **not medically necessary** for temporomandibular disorders include the following, not an all-inclusive listing:

1. Acupuncture
2. Artificial intelligence technologies for the diagnosis of TMD
3. Autologous blood injection
4. Biofeedback
5. Bio-oxidative ozone therapy
6. Botulinum Toxin (e.g., Botox) injections
7. Cranial (craniosacral) manipulation
8. Cryo-analgesia
9. Dental prostheses (for example, dentures; implants)
10. Dextrose prolotherapy
11. Diathermy, infrared, and ultrasound treatments

12. Dry needling
13. Dental restorations (for example, bridgework; crowns)
14. Electrogalvanic stimulation (EGS)
15. Gallium aluminum arsenide laser therapy for the treatment of TMD with myofascial pain
16. Intra-articular injection of hyaluronic acid (viscosupplementation)
17. Intra-articular injection of platelet-rich plasma
18. Intra-articular injections of rituximab
19. Intra-aural devices (eg, TMJ NextGeneration)
20. Iontophoresis
21. Jaw mobility mechanical stretching device (eg, Dynasplint System, OraStretch Press Jaw Motion Rehab System, TheraBite Jaw Motion Rehabilitation System)
22. Jaw Motion Rehabilitation
23. Ketamine (local/intra-articular administration)
24. Laser capsulorrhaphy
25. Magnetic neurostimulator
26. Manual therapy
27. MIRO therapy
28. Myofunctional therapy
29. Myomonitor treatment (J-4, BNS-40, Bio-TENS)
30. Occlusal equilibration, bite adjustment, irreversible occlusion therapy
31. Orthodontic services such as braces and application of a mandibular advancement repositioning device
32. Permanent mandibular repositioning (e.g., equilibration, orthodontics)
33. Photo-biomodulation for the treatment of TMD and TMJ dysfunction
34. Phototherapy (e.g., low-level (cold) laser therapy (LLLT) and light-emitting diode (LED) therapy)
35. Propranolol
36. Prophylactic management of TMJ disorder, including occlusal adjustment
37. Radiofrequency generator thermolysis
38. Sclerotherapy
39. Stem cell therapy
40. Therabite Jaw Motion Rehabilitation System
41. Transcranial direct current stimulation
42. Transcutaneous electrical nerve stimulation (TENS)

Surgical procedures considered **not medically necessary** for temporomandibular disorders include, but are not limited to, the following:

1. Dental implants
2. Dental restorations
3. Extraction of wisdom teeth
4. Orthodontic services
5. Permanent mandibular repositioning (e.g., full-mouth reconstruction)
6. TMJ arthroplasty implants that are not FDA approved

The following diagnostic tests and procedures are considered **not medically necessary** when used to diagnose or evaluate temporomandibular disorders include, but are not limited to, the following:

1. Computerized mandibular scan (intended to document deviations in occlusion and muscle spasm by recording muscle activity related to mandibular movement or positioning)
2. Genetic testing
3. Intra-oral tracing or gothic arch tracing (intended to document deviations in jaw positioning)
4. Joint vibration analysis
5. Electromyography (including percutaneous or surface electrode methods)
6. Kinesiography
7. Laryngeal function studies
8. Rhinomanometry
9. Salivary stress biomarkers (e.g., alpha-amylase and cortisol levels)

10. Somatosensory testing/neuromuscular junction testing
11. Sonogram (ultrasonic Doppler auscultation)
12. Standard dental radiographic procedures
13. Swallowing studies or tests
14. Thermography
15. Transcranial or lateral skull x-ray
16. Ultrasonography

CODING/BILLING INFORMATION:

The appearance of a code in this section does not necessarily indicate coverage. Codes that are covered may have selection criteria that must be met. Payment for supplies may be included in payment for other services rendered.

CPT CODES	
20605	Arthrocentesis, aspiration and/or injection, intermediate joint, or bursa (e.g., temporomandibular, acromioclavicular, wrist, elbow, or ankle, olecranon bursa); without ultrasound guidance
20606	Arthrocentesis, aspiration and/or injection, intermediate joint, or bursa (e.g., temporomandibular, acromioclavicular, wrist, elbow, or ankle, olecranon bursa); with ultrasound guidance, with permanent recording and reporting
21010	Arthrotomy, temporomandibular joint
21050	Condylectomy, temporomandibular joint (separate procedure)
21060	Meniscectomy, partial or complete, temporomandibular joint (separate procedure)
21073	Manipulation of temporomandibular joint(s) (TMJ), therapeutic, requiring an anesthesia service (i.e., general or monitored anesthesia care)
21110	Application of interdental fixation device for conditions other than fracture or dislocation, includes removal
21116	Injection procedure for temporomandibular joint arthrography
21240	Arthroplasty, temporomandibular joint, with or without autograft (includes obtaining graft)
21242	Arthroplasty, temporomandibular joint, with allograft
21243	Arthroplasty, temporomandibular joint, with prosthetic joint replacement
29800	Arthroscopy, temporomandibular joint, diagnostic, with or without synovial biopsy (separate procedure)
29804	Arthroscopy, temporomandibular joint, surgical
HCPCS CODES	
E1700	Jaw motion rehabilitation system
E1701	Replacement cushions for jaw motion rehabilitation system, pkg. of 6
E1702	Replacement measuring scales for jaw motion rehabilitation system, pkg. of 200

REVISION HISTORY EXPLANATION: ORIGINAL EFFECTIVE DATE: 04/26/2018

Date	Explanation & Changes
04/26/2018	<ul style="list-style-type: none"> Treatment of temporomandibular joint (TMJ) disorders does not require prior authorization when determined to be medically necessary as the medical criteria and guidelines are met Policy created to reflect most current clinical evidence per The Technology Assessment Working Group (TAWG)
06/12/2018	<ul style="list-style-type: none"> Policy reviewed and updated to reflect most current clinical evidence per Medical Policy Steering Committee
12/28/2020	<ul style="list-style-type: none"> Medical policy placed on the new Paramount Medical policy format
03/03/2023	<ul style="list-style-type: none"> Medical Policy updated to reflect Medicaid coverage to Anthem as of 02/01/2023
02/01/2024	<ul style="list-style-type: none"> Medical Policy reviewed and updated to reflect the most current clinical evidence Updated exclusions

02/01/2025	<ul style="list-style-type: none"> Medical Policy reviewed and updated to reflect the most current clinical evidence <ul style="list-style-type: none"> No changes to indicated Removed Related Medical Policies
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Paramount reserves the right to review and revise our policies periodically when necessary. When there is an update, we will publish the most current policy to
<https://www.paramounthealthcare.com/providers/medical-policies/policy-library>

REFERENCES/RESOURCES

Centers for Medicare and Medicaid Services, CMS Manual System and other CMS publications and services
<https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals> <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Internet-Only-Manuals-IOMs>

National Physician Fee Schedule Relative Value File Calendar Year XXXX, Centers for Medicare & Medicaid Services (CMS) <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/PFS-Relative-Value-Files>

NCCI Policy Manual for Medicare Services, current version, Chapter 1, General Correct Coding Policies
<https://www.cms.gov/files/document/medicare-ncci-policy-manual-2023-chapter-1.pdf>

American Medical Association, *Current Procedural Terminology (CPT®)* and associated publications and services <https://www.ama-assn.org/amaone/cpt-current-procedural-terminology>

Centers for Medicare and Medicaid Services, Healthcare Common Procedure Coding System, HCPCS Release and Code Sets <https://www.cms.gov/Medicare/Coding/HCPCSReleaseCodeSets/HCPCS-Quarterly-Update>

Centers for Medicare & Medicaid Services (CMS), ICD-10-CM Official Guidelines for Coding and Reporting
<https://www.cms.gov/medicare/coding/icd10>

Centers of Medicare & Medicaid Services (CMS), Medicare Claims Processing Manual, Chapter 23-Fee Schedule administration and coding Requirements <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/clm104c23.pdf>

Centers for Medicare & Medicaid Services (CMS), National Correct Coding Initiative (NCCI) Policy Manual for Medicare Services <https://www.cms.gov/medicare-medicare-coordination/national-correct-coding-initiative-ncci/ncci-medicare>

Center for Medicare and Medicaid Services, Medicare NCCI Medically Unlikely Edits (MUEs)
<https://www.cms.gov/medicare/coding-billing/national-correct-coding-initiative-ncci-edits/medically-unlikely-edits>
U.S. Preventive Services Task Force, <https://www.uspreventiveservicestaskforce.org/uspstf/>

Hayes, Inc., <https://www.hayesinc.com/>

Custom 3D Printed Prostheses for Temporomandibular Joint Disorders,

<https://evidence.hayesinc.com/report/earb.3dprostheses5432>

Botulinum Toxin for Treatment of Pain Associated with Temporomandibular Disorders,

<https://evidence.hayesinc.com/report/dir.botoxtemporo4900>

Acupuncture for Treatment of Temporomandibular Disorders,

<https://evidence.hayesinc.com/report/earb.temporo5634>

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