

Case Number:	CM13-0003357		
Date Assigned:	11/27/2013	Date of Injury:	05/20/2009
Decision Date:	01/23/2014	UR Denial Date:	07/15/2013
Priority:	Standard	Application Received:	07/25/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Physical Medicine and Rehabilitation and is licensed to practice in California. He/she has been in active clinical practice for more than five years and is currently working at least 24 hours a week in active practice. The physician reviewer was selected based on his/her clinical experience, education, background, and expertise in the same or similar specialties that evaluate and/or treat the medical condition and disputed items/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

The underlying date of injury in this case is 05/20/2009. The primary diagnosis is a lumbar postlaminectomy syndrome. A prior physician review recommended non-certification of a 1-month trial of H-wave. That review noted that there was no indication that the H-wave would be used as an adjunct to active rehabilitation and notes that the patient had also been approved for an Advanced Rehabilitation Technologies stimulator unit to address pain, and therefore medical necessity was not evident. A treating physician followup 08/21/2013 request to appeal a denial of an H-wave unit based on functional gains with a recent trial, the treating physician notes that the patient had been using the device for flare-ups of low back pain and left leg pain and was able to walk longer and do pool exercises and do more gardening and spend more time with her husband and grandchildren. The patient reported that she could avoid further injections due to her recent use of the H-wave unit, and she had reduced her Percocet usage down to 3 per day rather than her prior 4-5 per day. The progress note relevant to this specific review at this time is of 06/26/2013 which is the request for a trial of an H-wave unit for non-pharmacological pain control. That note states that the patient tried a neurostimulator while in physical therapy, although that was almost two years and that the current trial was for a 1-month H-wave noted to assess the efficacy of this treatment. That progress note states that the patient was status post a bilateral S1 epidural injection on 05/31/2013 and reported 80% improvement of low back pain and right leg and heel pain and was able to walk for long periods of time and sit for longer periods of time and get in and out of her car easier and had been able to reduce her Percocet from 4-5 per day down to 3 per day.

IMR ISSUES, DECISIONS AND RATIONALES

The Final Determination was based on decisions for the disputed items/services set forth below:

H wave device: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines H-Wave Stimulation Page(s): 117.

Decision rationale: The Chronic Pain Medical Treatment Guidelines Section on H-Wave Stimulation, page 117, states "a one-month home-based trial of H-Wave stimulation may be considered as a noninvasive conservative option chronic soft tissue inflammation following failure of initially recommended conservative care including physical therapy and medications plus transcutaneous electrical nerve stimulation." An appeal letter at this time subsequent to the H-wave trial actually occurring states that this treatment has been effective in helping the patient to improve specific activities of daily living and in reducing her need for Percocet. However, the medical records indicate that these exact same improvements pharmacologically and functionally were noted to have occurred following an epidural steroid injection and a conservative treatment and prior to the H-wave trial. Thus, it appears that this patient has had success from the recommended treatment which preceded the H-wave trial. It is unclear why the H-wave trial would alternatively be credited with this significant improvement. Moreover, the medical records outline a prior trial of a stimulator approximately two years previously but did not clearly outline the results and did not clearly indicate that this was a TENS unit, and for that reason it is not clear that the patient has fully met the criteria for exhausting first-line treatment before H-wave use. For these multiple reasons, this patient does not meet the criteria at this time for an H-wave trial or an H-wave purchase. This request is not medically necessary.