

Case Number:	CM13-0047113		
Date Assigned:	12/27/2013	Date of Injury:	08/23/2010
Decision Date:	03/18/2014	UR Denial Date:	10/16/2013
Priority:	Standard	Application Received:	11/04/2013

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 & Rehabilitation, has a subspecialty in Interventional Spine 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:

This is a 52 year-old male who was injured on 8/23/10. On 10/16/13, [REDACTED] denied additional PT x12 and an H-wave trial, based on the 9/10/13 and 10/3/13 reports from [REDACTED]. According to the 10/3/13 medical report, the patient presents with ongoing knee pain, low back pain and right ulnar neuropathy. He had attended PT x12 at [REDACTED] but the patient felt he plateaued. A H-wave trial was requested because he tried TENS at the physical therapy facility and it was not successful. The request for 12 sessions of PT apparently came from the 8/29/13 report. He has been diagnosed with lumbar DDD with herniation; s/p right CTR; probable ulnar neuropathy at the wrist; right knee pain, s/p right shoulder surgery with ongoing problems.

IMR ISSUES, DECISIONS AND RATIONALES

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

Additional physical therapy for the back x12:

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 98-99.

Decision rationale: The patient presents with low back and right upper extremity pain. On 8/29/13 a request was made for continued PT x12 for the lumbar spine. The records show the patient had a shoulder surgery on 3/21/13 and would be in the MTUS post-surgical physical medicine treatment timeframe for this, but there was no history of lumbar surgery. The records show that he had been to PT for the shoulder and went to a different PT facility for the lower back. The records show he was attending PT from July 2013 for the lower back. The MTUS chronic pain guidelines would apply for PT for the lower back. MTUS states that for various myalgias and neuralgias, 8-10 PT sessions are recommended. The request for 12 additional PT sessions for the lower back will exceed the MTUS recommendations.

H wave trial: Overturned

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines TENS Page(s): 114-121.

Decision rationale: The patient presents with low back and right upper extremity pain. The patient has had PT, medications, there is neuropathic pain in the upper extremities and non-neuropathic pain in the lower back. There has been a trial of TENS. MTUS criteria for H-wave states: "Not recommended as an isolated intervention, but a one-month home-based trial of H-Wave stimulation may be considered as a noninvasive conservative option for diabetic neuropathic pain (Julka, 1998) (Kumar, 1997) (Kumar, 1998), or chronic soft tissue inflammation if used as an adjunct to a program of evidence-based functional restoration, and only following failure of initially recommended conservative care, including recommended physical therapy (i.e., exercise) and medications, plus transcutaneous electrical nerve stimulation (TENS)." It appears that the patient has met the MTUS criteria for an H-wave trial.