

<b>Case Number:</b>	CM13-0054680		
<b>Date Assigned:</b>	12/30/2013	<b>Date of Injury:</b>	03/19/1996
<b>Decision Date:</b>	03/14/2014	<b>UR Denial Date:</b>	10/30/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/19/2013

### 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 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 58 year-old male sustained an injury on 3/19/96 while employed by [REDACTED]. Request under consideration include a mattress pillow top pad from [REDACTED] for California King Bed. Report of 10/24/13 from [REDACTED] noted chronic pain of multiple body parts with mid, lower back, gluts, right lateral thigh, right posterior leg, right sole, and right hallux pain. Exam noted obese, head forward and shoulders hunched posture; cane left hand without antalgia. Current diagnoses include chronic pain syndrome, spinal stenosis of cervical spine, personal history of cervical fusion, and cervical disc degeneration. Treatment to date has included injections and medications. Above treatment request for a mattress pillow top was non-certified on 10/30/13 citing guidelines criteria and lack of medical necessity

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Mattress pillow top pad from [REDACTED] for California King:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG).

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Ortho Mattress.

**Decision rationale:** This 58 year-old male sustained an injury on 3/19/96 while employed by [REDACTED]. Request under consideration include a mattress pillow top pad from [REDACTED] for California King Bed. Report of 10/24/13 from [REDACTED] noted chronic pain of multiple body parts with mid, lower back, gluts, right lateral thigh, right posterior leg, right sole, and right hallux pain. Exam noted obese, head forward and shoulders hunched posture; cane left hand without antalgia. Current diagnoses include chronic pain syndrome, spinal stenosis of cervical spine, personal history of cervical fusion, and cervical disc degeneration. Treatment to date has included injections and medications. MTUS/ACOEM Guidelines do not address orthopedic mattress; however, ODG does not recommend specialized mattresses for spinal injuries especially for a diagnosis of chronic cervical strain/sprain, stenosis and degenerative disc with unchanged chronic pain symptoms and clinical exam without noted neurological change. Mattress selection is subjective and depends on personal preference and individual factors. There is no report of low back condition in the absence of unstable spinal fractures or cauda equine syndrome. Submitted reports have not addressed or demonstrated medical necessity to support for this orthopedic mattress. The mattress pillow top pad from [REDACTED] for California King Bed is not medically necessary and appropriate.