

Case Number:	CM13-0069996		
Date Assigned:	01/17/2014	Date of Injury:	04/20/2009
Decision Date:	08/05/2014	UR Denial Date:	11/25/2013
Priority:	Standard	Application Received:	12/23/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is Board Certified in Anesthesiology, has a subspecialty in Pain Medicine 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 expert 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 injured worker is a 53 year old male who reported an injury regarding his left lower extremity. The clinical note dated 01/28/13 indicates the injured worker undergoing treatment for relaxation focused psychotherapy as well as psychopharmacological treatments. The injured worker has previously been recommended for psychotherapy treatments. The sleep study completed on 08/27/13 indicates the injured worker having complaints of impaired sleep averaging approximately 5 hours each night. The injured worker stated that he has difficulty initiating sleep and frequently wakes through the night. The injured worker also reported difficulty falling asleep with a C-pap machine on. There was also an indication the injured worker had developed gastroesophageal reflux disease (GERD/acid reflux). The note indicates the injured worker utilizing Lyrica, Zolpidem, Tramadol, and Meloxicam for pain relief. The note indicates the injured worker having scored an 11 on the Epworth sleep scale. These findings were indicative of the injured worker having a sleep disorder. The clinical note dated 09/25/13 indicates the injured worker having previously undergone an open reduction internal fixation (ORIF) at the left ankle as well as an arthroscopy in September of 2009. The clinical note dated 09/28/13 indicates the injured worker continuing with sleep apnea. Tenderness was identified upon palpation throughout the abdomen. The clinical note dated 10/23/13 indicates the injured worker showing a major depression disorder as well as generalized anxiety. The utilization review dated 11/25/13 resulted in a denial for a C-pap device and associated accessories as no information had been submitted confirming the injured worker's need for a C-pap machine.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retro: nasal interface (mask or cannula type) used with CPAP device, with or without strap; 3/28/2013: Upheld

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: 1.)Kubicka, Z. J.; Limauro, J.; Darnall, R. A. (2008). "Heated, Humidified High-Flow Nasal Cannula Therapy: Yet Another Way to Deliver Continuous Positive Airway Pressure?". Pediatrics 121 (1): 82-88.2.)Roca, O.; Riera, J.; Torres, F.; Masclans, J. R. (2010). "High-flow oxygen therapy in acute respiratory failure". Respiratory care 55 (4): 408-413.3.)Barbe F, et al. (2010). Long-term effect of continuous positive airway pressure in hypertensive patients with sleep apnea. American Journal of Respiratory and Critical Care Medicine, 181(7): 718-726.

Decision rationale: The request for C-pap accessories is not medically necessary. The documentation indicates the injured worker having been diagnosed with sleep apnea. The use of additional accessories with a C-pap is indicated provided the injured worker meets specific criteria to include the medical need indicating the injured worker's benefit to the use of the accessories. No clinical information has been submitted confirming the medical need regarding the use of accessories to the C-pap. Therefore, it is unclear if the injured worker would benefit from the use of these accessories. As such, this request is not indicated as medically necessary.

Retro: tubing used with CPAP device; 3/28/2013: Upheld

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: 1.)Kubicka, Z. J.; Limauro, J.; Darnall, R. A. (2008). "Heated, Humidified High-Flow Nasal Cannula Therapy: Yet Another Way to Deliver Continuous Positive Airway Pressure?". Pediatrics 121 (1): 82-88.2.)Roca, O.; Riera, J.; Torres, F.; Masclans, J. R. (2010). "High-flow oxygen therapy in acute respiratory failure". Respiratory care 55 (4): 408-413.3.)Barbe F, et al. (2010). Long-term effect of continuous positive airway pressure in hypertensive patients with sleep apnea. American Journal of Respiratory and Critical Care Medicine, 181(7): 718-726.

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Retro: Disposable filters used with CPAP device, #6; 3/28/2103: Upheld

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence:1.)Kubicka, Z. J.; Limauro, J.; Darnall, R. A. (2008). "Heated, Humidified High-Flow Nasal Cannula Therapy: Yet Another Way to Deliver Continuous Positive Airway Pressure?". *Pediatrics* 121 (1): 82-88.2.)Roca, O.; Riera, J.; Torres, F.; Masclans, J. R. (2010). "High-flow oxygen therapy in acute respiratory failure". *Respiratory care* 55 (4): 408-413.3.)Barbe F, et al. (2010). Long-term effect of continuous positive airway pressure in hypertensive patients with sleep apnea. *American Journal of Respiratory and Critical Care Medicine*, 181(7): 718-726.

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