

Case Number:	CM14-0017094		
Date Assigned:	05/02/2014	Date of Injury:	01/28/2013
Decision Date:	07/08/2014	UR Denial Date:	01/07/2014
Priority:	Standard	Application Received:	02/11/2014

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 Physical Medicine & Rehabilitation, 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 patient is a 63-year-old female who was injured on 01/28/2013, as she believes she tripped on a doorstep that extended from the door and landed on her right side. Prior treatment history has included physical therapy from 08/26/2013 through 10/01/2013. PR-2 dated 11/28/2013 documented the patient with complaints of pain, impaired range of motion and impaired activities of daily life (ADLs). Treatment Plan is for a 30-day trial of H-Wave Homecare System, one-month home use evaluation to be used 1-2 times a day for 30-60 minutes each session. Treatment Goals are to 1) to replace or eliminate pain, 2) Improve functional capacity and ADLs, 3) To reduce or prevent the need for oral medications 4) To improve circulation 5) To decrease or prevent muscle spasm and muscle atrophy and 6) To provide self-management tool to the patient. Home electrotherapy record dated 12/18/2013 documents the use of a TENS unit for 15 minutes and the patient stating it did not provide adequate relief. He stated it does not go deep enough where his pain is located. UR report dated 01/07/2014 denied the request for H-Wave Home Unit for 30 days. There is no documentation of current symptoms, physical examination and treatment plan. There is no documentation of physical therapy, patient participation in home exercise program and TENS unit trial. In the setting, the H-Wave 30 day trial is not medically necessary.

IMR ISSUES, DECISIONS AND RATIONALES

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

30 DAY TRIAL OF AN H-WAVE UNIT: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines H-WAVE STIMULATION.

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

Decision rationale: According to the CA MTUS guidelines, H-Wave is 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, or chronic soft tissue inflammation if used as an adjunct to a program of evidence-based functional restoration, and only following failure to respond to conventional therapy, including physical therapy, medications, and TENS. The medical records do not include documentation of current symptoms, physical examination findings, diagnosis and treatment plan. There is no documentation regarding the patient's response to physical therapy and patient's participation in home exercise program. Furthermore, the medical records do not establish this patient has diabetic neuropathic pain, or chronic soft tissue inflammation, with failure to respond to all conventional therapies. Consequently, the medical records do not establish an H-Wave unit trial is medically indicated. The request is not medically necessary.