MAXIMUS Federal Services

Case Number:	CM14-0117646		
Date Assigned:	08/06/2014	Date of Injury:	07/26/2003
Decision Date:	09/24/2014	UR Denial Date:	07/09/2014
Priority:	Standard	Application Received:	07/28/2014

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 and Rehabilitation and is licensed to practice in Illinois. 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 48-year-old female with a reported date of injury on 07/26/2003. The mechanism of injury was not submitted within the medical records. His diagnoses were noted to include morbid obesity and end stage chronic pain syndrome with fecal/urinary incontinence. His previous treatments were noted to include medications, therapy, and TENS, and intensive cognitive therapy. The progress note dated 06/04/2014 reveals global pain complaints and fecal/urinary incontinence. The injured worker indicated he had been provided with Vesicare and was undergoing urologic testing. The injured worker did indicate some improvement was in urinary control with the use of Vesicare. The physical examination revealed the injured worker was morbidly obese and his movements were restricted with pain behavior. The request for authorization form was not submitted within the medical records. The request was for adult diapers for fecal/urinary incontinence.

IMR ISSUES, DECISIONS AND RATIONALES

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

Adult Diapers: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines-Treatment Index 11th Edition- Knee- Durable Medical Equipment.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Knee and Leg, Durable Medical Equipment.

Decision rationale: The request for adult diapers is not medically necessary. The injured worker complains of fecal/urinary incontinence. The Official Disability Guidelines recommend durable medical equipment generally if there is a medical need and if the device or system meets Medicare's definition of durable medical equipment. Most bathroom and toilet supplies do not customarily serve a medical purpose and are primarily used for convenience in the home. Certain DME toilet items such as commodes and bedpans are medically necessary if the patient is bed- or room- confined and devices such as raised toilet seats, commode chairs, sitz bath, and portable whirlpools may be medically necessary when prescribed as part of a medical treatment plan for an injury, infection, or conditions that result in physical limitations. The injured worker does complain of fecal/urinary incontinence, however, there is a lack of documentation regarding the injured worker's inability to ambulate to the restroom and the guidelines state that most toilet items are not medically necessary but are more for the injured worker's convenience. The guidelines state that durable medical equipment may be recommended generally if there is a medical need if the device meets Medicare's definition of durable medical equipment which includes a device that can withstand repeated use, customarily is used to serve a medical purpose, and is generally not useful to a person in absence of illness or injury. The guidelines state most bathroom and toilet supplies do not customarily serve a medical purpose and are primarily used for convenience. Although it was noted that the injured worker experienced fecal and urinary incontinence, it remains unclear how this relates to the injured worker's injuries as the only documentation provided showed the injured worker had symptomatology associated with mental illness. Therefore, due to the lack of documentation regarding clinical findings to support the request, adult diapers are not appropriate at this time. Therefore, the request is not medically necessary.