

Case Number:	CM14-0155302		
Date Assigned:	09/25/2014	Date of Injury:	10/28/1998
Decision Date:	10/27/2014	UR Denial Date:	09/09/2014
Priority:	Standard	Application Received:	09/23/2014

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 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:

This is a 68 year old male with a 10/28/1998 date of injury. The exact mechanism of the original injury was not clearly described. A progress reported dated 9/2/14 noted subjective complaints of low back, hip, right leg pain. Objective findings included lumbar paraspinal tenderness and facet tenderness. Diagnostic Impression: lumbar postlaminectomy syndrome, myofascial pain syndrome. Treatment to Date: medication management, physical therapy, TENSA UR decision dated 9/9/14 denied the request for percutaneous electrical nerve stimulator with HRV/ANS monitoring. Although a trial of PENS treatment has weak support from ODG, given the failure with first-line conservative care including TENS use, the medical necessity of the requested adjunctive HRV/ANS monitoring has not been established.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 Unit Percutaneous Electrical Nerve Stimulator with HRV/ANS Monitoring: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints, Chronic Pain Treatment Guidelines Percutaneous Electrical Nerve Stimulation.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines PENS Page(s): 97. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) pain chapter

Decision rationale: MTUS and ODG state that Percutaneous electrical nerve stimulation (PENS) "is not recommended as a primary treatment modality, but a trial may be considered, if used as an adjunct to a program of evidence-based functional restoration, after other non-surgical treatments, including therapeutic exercise and TENS, have been tried and failed or are judged to be unsuitable or contraindicated." There is a lack of high quality evidence to prove long-term efficacy. Percutaneous electrical nerve stimulation (PENS) is similar in concept to transcutaneous electrical nerve stimulation (TENS) but differs in that needles are inserted to a depth of 1 to 4 cm either around or immediately adjacent to the nerve serving the painful area and then stimulated. PENS is generally reserved for patients who fail to get pain relief from TENS, apparently due to obvious physical barriers to the conduction of the electrical stimulation (e.g., scar tissue, obesity). PENS must be distinguished from acupuncture with electrical stimulation. In PENS the location of stimulation is determined by proximity to the pain. However, there is no mention that the patient is participating in a functional restoration program. There is no mention that the patient failed TENS as a result of obesity or scar tissue. Additionally, there is no good evidence of long term efficacy of this treatment modality. Therefore, the request for 1 unit percutaneous electrical nerve stimulator with HRV/ANS monitoring is not medically necessary.