

<b>Case Number:</b>	CM14-0036348		
<b>Date Assigned:</b>	06/25/2014	<b>Date of Injury:</b>	05/13/2011
<b>Decision Date:</b>	07/25/2014	<b>UR Denial Date:</b>	03/07/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/25/2014

### 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 Orthopedic Surgery, and is licensed to practice in Mississippi. 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 55-year-old male with a date of injury of May 13, 2011. The mechanism of injury is not disclosed. The most recent progress note provided, dated January 22, 2014, indicates the claimant presents with neck and low back pain that is unchanged from the prior visit. The claimant's sleep quality is reported to be poor. Current medications include Butrans patch, which the claimant is requesting to be increased on the date of this encounter. A Qualified Medical Evaluation (QME) two months prior determined the claimant to be permanent and stationary. The injured has not been working for three years. This record indicates that the claimant is requesting a Tempur Choice Supreme Queen Mattress set. Noting that his current mattress is 3-4 years old and provides no relief or comfort. The diagnoses include cervical radiculopathy, low back pain, shoulder pain, and unilateral inguinal hernia. Prior treatment, according to the medical record, has included transforaminal cervical epidural steroid injections and counseling. The treatment recommendation is to increase the Butrans patch, request the mattress set, and request a QME from a treating physician office with follow-up in eight weeks. A prior request was made for this specific queen-size mattress set and was not recommended for certification in a prior review on March 7, 2014.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Tempur Choice Supreme Queen mattress set: 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), Low Back - Lumbar & Thoracic (Acute & Chronic), (updated 07/03/14).

**Decision rationale:** The Medical Treatment Utilization Schedule Guidelines indicate that there are no high quality studies supporting the purchase of any specific type of mattress or bedding as a treatment for low back pain. The guidelines indicate that mattress selection is subjective and based on personal preferences and individual factors, and is not supported by evidence-based studies. Therefore, Official Disability Guidelines do not support the purchase of any type of specialized mattress or bedding as a treatment for low back pain in the absence of pressure ulcers, as might occur from a spinal cord injury. When noting that the record does not provide any evidence of a spinal cord injury or pressure ulcers from such, there would be no clinical indication to support the purchase of an orthopedic mattress out of medical necessity. Therefore, this request is not medically necessary.