

Case Number:	CM14-0045675		
Date Assigned:	06/27/2014	Date of Injury:	11/12/2013
Decision Date:	08/26/2014	UR Denial Date:	03/05/2014
Priority:	Standard	Application Received:	04/03/2014

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 Occupational 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 applicant is a represented [REDACTED] employee who has filed a claim for ankle pain reportedly associated with an industrial trip and fall injury of November 12, 2013 in which the applicant apparently sustained an ankle fracture. Thus far, the applicant has been treated with the following: Analgesic medications; splinting/immobilization of the fracture; and extensive periods of time off of work, on total temporary disability. In a utilization review report dated March 5, 2014, the claims administrator denied a request for a one-month rental of a TENS unit. The applicant's attorney subsequently appealed. The TENS unit device was apparently sought via vendor form dated February 24, 2014, in which the vendor apparently posited that the applicant had continuing complaints of pain which had proven recalcitrant to physical therapy, medications, exercise, and a TENS unit. The vendor form employed preprinted checkboxes and continued little or no narrative commentary. Several articles on the benefits of H-wave therapy were also furnished. In a doctor's first report, handwritten, not clearly dated, the applicant was placed off work, on total temporary disability, through February 1, 2014 owing to an ankle fracture. There was no mention made of the H-wave device in question on that occasion. The applicant was also placed off of work on November 18, 2013 note through January 2, 2014. Again, no mention was made of the H-wave device. On January 15, 2014, the applicant was described as attending physical therapy and tolerating it well. The applicant was using Advil, tramadol, and Naprosyn, it was acknowledged at that point.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 H-wave rental for 1 month: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines H-Wave Stimulation (HWT).

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

Decision rationale: As noted on page 117 of the MTUS Chronic Pain Medical Treatment Guidelines, H-wave stimulation is tepidly endorsed as a fourth-line treatment for chronic soft tissue inflammation and/or diabetic neuropathic pain in applicants in who have tried and failed first and second line treatment such as physical therapy, analgesic medications, home exercise, and a conventional TENS unit. In this case, however, there is no concrete evidence submitted to the effect that the applicant has in fact tried, failed, and exhausted analgesic medications, physical therapy, and TENS unit. To the contrary, progress note submitted by the applicant's treating provider suggested that the applicant is tolerating oral analgesics and physical therapy well, including Advil, Naprosyn, and Tramadol, effectively the obviating the need for the proposed H-wave device. Therefore, the request is not medically necessary.