

Case Number:	CM14-0015292		
Date Assigned:	02/28/2014	Date of Injury:	11/30/2004
Decision Date:	10/08/2015	UR Denial Date:	01/29/2014
Priority:	Standard	Application Received:	02/06/2014

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:
 State(s) of Licensure: New Jersey, Alabama, California
 Certification(s)/Specialty: Neurology, Neuromuscular Medicine

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 62 year old male with an industrial injury dated 11-30-2004. His diagnoses included status post lumbar 4-5 and lumbar 5-sacral 1 interbody fusion, right lower extremity radiculopathy and right knee sprain-strain secondary to fall. Prior treatment included lumbar epidural steroid injection and medication. He presented on 12-23-2013 with complaints of low back pain radiating down to both lower extremities. Physical exam of the lumbar musculature revealed tenderness to palpation bilaterally with increased muscle rigidity. The provider documented there were numerous trigger points which were palpable and tender with taut bands throughout the lumbar paraspinal muscles. There was noted muscle guarding with range of motion testing. The provider documents the injured worker needs a comfortable and supportive mattress which will provide the correct amount of support to his back as he often develops flare up of his low back pain if he sleeps poorly at night. The provider documents the injured worker required extra medication because of an uncomfortable bed. The treatment request is for one (1) purchase or rental of Sleep Number P6 bed (King size) with leg set (king size) and delivery and setup.

IMR ISSUES, DECISIONS AND RATIONALES

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

One (1) Purchase or rental of Sleep Number P6 bed (King size) with leg set (king size) and delivery and setup: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM, low back disorders.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Mattress Selection. <http://www.odg-twc.com/index.html>.

Decision rationale: According to ODG guidelines, mattress selection "Not recommended to use firmness as sole criteria. In a recent RCT, a waterbed (Aqva) and a body-contour foam mattress (Tempur) generally influenced back symptoms, function, and sleep more positively than a hard mattress, but the differences were small. The dominant problem in this study was the large amount of dropouts. The predominant reason for dropping out before the trial involved the waterbed, and there was some prejudice towards this type of mattress. The hard mattress had the largest amount of test persons who stopped during the trial due to worsening LBP, as users were more likely to turn around in the bed during the night because of pressures on protruding body parts. (Bergholdt, 2008) Another clinical trial concluded that patients with medium-firm mattresses had better outcomes than patients with firm mattresses for pain in bed, pain on rising, and disability; a mattress of medium firmness improves pain and disability among patients with chronic non-specific low-back pain. (Kovacs, 2003) There are no high quality studies to support purchase of any type of specialized mattress or bedding as a treatment for low back pain. Mattress selection is subjective and depends on personal preference and individual factors. On the other hand, pressure ulcers (e.g., from spinal cord injury) may be treated by special support surfaces (including beds, mattresses and cushions) designed to redistribute pressure. (McInnes, 2011)" According to the patient's record, the patient developed chronic back pain; however, as per the above guidelines, mattresses are not medically necessary in the treatment of back pain. Therefore, the request for the Purchase or rental of Sleep Number P6 bed (King size) with leg set (king size) and delivery and setup is not medically necessary.