

Case Number:	CM14-0128547		
Date Assigned:	08/18/2014	Date of Injury:	09/13/2011
Decision Date:	03/30/2015	UR Denial Date:	07/21/2014
Priority:	Standard	Application Received:	08/12/2014

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 York

Certification(s)/Specialty: Internal 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:

Patient had a date of injury on 9/13/2011. A pipe struck the patient in the left lower extremity. Lower back pain started several months after the accident. Diagnosis includes: Lumbar disc herniations at L4-L5 and L5-S1 with moderate to severe neural foraminal narrowing, Facet arthropathy of lumbar spine, and multilevel disc herniations of the thoracic spine. Patient has had chiropractor sessions and physical therapy.

IMR ISSUES, DECISIONS AND RATIONALES

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

TENS unit purchase: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 116.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines TENS Page(s): 114.

Decision rationale: Based on guidelines TENS is not recommended as a primary treatment modality, but a one-month home-based TENS trial may be considered as a noninvasive conservative option, if used as an adjunct to a program of evidence-based functional

restoration. Based on the patient's medical records there is no indication that a functional-restoration program has begun. Due to the above reasons it is medically unnecessary to purchase a Tens Unit.