

| | | | |
|-----------------------|--------------|------------------------------|------------|
| Case Number: | CM14-0184322 | | |
| Date Assigned: | 11/12/2014 | Date of Injury: | 10/06/2009 |
| Decision Date: | 01/31/2015 | UR Denial Date: | 10/20/2014 |
| Priority: | Standard | Application Received: | 11/05/2014 |

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 and Environmental Medicine and is licensed to practice in Ohio and West Virginia. 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 individual is a 51 year old female who sustained an industrially related injury on OCT 10th, 2009 involving her right arm and shoulder. She has ongoing complaints of right upper extremity pain (4-9/10), insomnia, anxiety and depression. She is noted to have no use of her right arm and this is related to both pain due to CRPS as well as a psychophysiologic disorder (she believes her arm is paralyzed) there is a note of 1/5 strength and decreased range of motion in the right shoulder. She is status post 4 operative procedures to her right shoulder. Numerous progress reports a stable syndrome with frequent exacerbations. She is undergoing a functional restoration program and the available record indicates that the treating physician feel she is highly motivated and progressing well. This request is for multiple items of durable equipment (scissors, jar opener, reacher, rocker knife and a one handed cutting board) to aid with decreased functionality as well as a pillow for a sleep aide and a community gym membership.

IMR ISSUES, DECISIONS AND RATIONALES

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

Long loops scissors: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG (Knee and Leg Chapter)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee and leg,

durable medical equipment Other Medical Treatment Guideline or Medical Evidence: Physical Dysfunction Practice Skills for Occupational Therapy Mary Beth Earl published by Elsevier Health Sciences, Aug 7, 2013; Medicare.gov, durable medial equipment

Decision rationale: Official Disability Guidelines (ODG) states regarding durable medical equipment (DME); "Recommended generally if there is a medical need and if the device or system meets Medicare's definition of durable medical equipment (DME) below. Most bathroom and toilet supplies do not customarily serve a medical purpose and are primarily used for convenience in the home. Medical conditions that result in physical limitations for patients may require patient education and modifications to the home environment for prevention of injury, but environmental modifications are considered not primarily medical in nature." Medicare details DME as:-durable and can withstand repeated use-used for a medical reason-not usually useful to someone who isn't sick or injured-appropriate to be used in your home.The available records indicate all of the above criteria are met.Earl (2013) in the Home Management Activities section mentions the use of long loop scissors in the context of their use in home activities which can be accomplished safely if modified or adapted. The requested treatment is medically necessary and appropriate.

Zim undercabinet Jar Opener: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG (Knee and Leg Chapter)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee and leg, durable medical equipment Other Medical Treatment Guideline or Medical Evidence: Physical Dysfunction Practice Skills for Occupational Therapy Mary Beth Earl published by Elsevier Health Sciences, Aug 7, 2013 Medicare.gov, durable medial equipment

Decision rationale: Official Disability Guidelines (ODG) states regarding durable medical equipment (DME); "Recommended generally if there is a medical need and if the device or system meets Medicare's definition of durable medical equipment (DME) below. Most bathroom and toilet supplies do not customarily serve a medical purpose and are primarily used for convenience in the home. Medical conditions that result in physical limitations for patients may require patient education and modifications to the home environment for prevention of injury, but environmental modifications are considered not primarily medical in nature." Medicare details DME as:-durable and can withstand repeated use-used for a medical reason-not usually useful to someone who isn't sick or injured-appropriate to be used in your homeThe available records indicate all of the above criteria are met.Earl (2013) in the Home Management Activities section mentions the use of jar opener in the context of their use in home activities which can be accomplished safely if modified or adapted. The requested treatment is medically necessary and appropriate.

Swedish cutting board: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG (Knee and Leg Chapter)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee and leg, durable medical equipment Other Medical Treatment Guideline or Medical Evidence: Physical Dysfunction Practice Skills for Occupational Therapy Mary Beth Earl published by Elsevier Health Sciences, Aug 7, 2013; Medicare.gov, durable medial equipment

Decision rationale: Official Disability Guidelines (ODG) states regarding durable medical equipment (DME); "Recommended generally if there is a medical need and if the device or system meets Medicare's definition of durable medical equipment (DME) below. Most bathroom and toilet supplies do not customarily serve a medical purpose and are primarily used for convenience in the home. Medical conditions that result in physical limitations for patients may require patient education and modifications to the home environment for prevention of injury, but environmental modifications are considered not primarily medical in nature." Medicare details DME as:-durable and can withstand repeated use-used for a medical reason-not usually useful to someone who isn't sick or injured-appropriate to be used in your homeThe available records indicate all of the above criteria are met.The available records indicate all of the above criteria are met.Earl (2013) in the Home Management Activities section mentions the use of modified one handed cutting boards in the context of their use in home activities which can be accomplished safely if modified or adapted. The requested treatment is medically necessary and appropriate.

Rocket T knife: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG (Knee and Leg Chapter)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee and leg, durable medical equipment Other Medical Treatment Guideline or Medical Evidence: Physical Dysfunction Practice Skills for Occupational Therapy Mary Beth Earl published by Elsevier Health Sciences, Aug 7, 2013; Medicare.gov, durable medial equipment

Decision rationale: Official Disability Guidelines (ODG) states regarding durable medical equipment (DME); "Recommended generally if there is a medical need and if the device or system meets Medicare's definition of durable medical equipment (DME) below. Most bathroom and toilet supplies do not customarily serve a medical purpose and are primarily used for convenience in the home. Medical conditions that result in physical limitations for patients may require patient education and modifications to the home environment for prevention of injury, but environmental modifications are considered not primarily medical in nature." Medicare details DME as:-durable and can withstand repeated use-used for a medical reason-not usually useful to someone who isn't sick or injured-appropriate to be used in your homeThe available records indicate all of the above criteria are met.However, Earl (2013) in the Home Management Activities section mentions the use of serrated knives in the context of their use in home

activities which can be accomplished safely if modified or adapted; rocker knives are not mentioned in this context. The requested treatment is not medically necessary and appropriate.

PikStik Pro aluminum reacher: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG (Knee and Leg Chapter)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee and leg, durable medical equipment Other Medical Treatment Guideline or Medical Evidence: Physical Dysfunction Practice Skills for Occupational Therapy Mary Beth Earl published by Elsevier Health Sciences, Aug 7, 2013; Medicare.gov, durable medial equipment

Decision rationale: Official Disability Guidelines (ODG) states regarding durable medical equipment (DME); "Recommended generally if there is a medical need and if the device or system meets Medicare's definition of durable medical equipment (DME) below. Most bathroom and toilet supplies do not customarily serve a medical purpose and are primarily used for convenience in the home. Medical conditions that result in physical limitations for patients may require patient education and modifications to the home environment for prevention of injury, but environmental modifications are considered not primarily medical in nature." Medicare details DME as:-durable and can withstand repeated use-used for a medical reason-not usually useful to someone who isn't sick or injured-appropriate to be used in your homeThe available records indicate all of the above criteria are met.Earl (2013) in the Home Management Activities section mentions the use of reacher devices in the context of their use in home activities which can be accomplished safely if modified or adapted. The requested treatment is medically necessary and appropriate.

Atonilittle micropedic body pillow by [REDACTED]: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG (Knee and Leg Chapter)

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 - Mattress selection, Durable Medical Equipment (DME) Other Medical Treatment Guideline or Medical Evidence: Medicare.gov, durable medial equipment

Decision rationale: Official Disability Guidelines (ODG) states "There are no high quality studies to support purchase of any type of specialized mattress or bedding as a treatment for low back pain." Pressure ulcers (e.g., from spinal cord injury) may be treated by special support surfaces (including beds, mattresses and cushions) designed to redistribute pressure" the record does not provide any evidence of a spinal cord injury or pressure ulcers from such. ODG does state regarding durable medical equipment (DME), "Recommended generally if there is a medical need and if the device or system meets Medicare's definition of durable medical equipment (DME) below" Medicare details DME as:-durable and can withstand repeated use-

used for a medical reason-not usually useful to someone who isn't sick or injured-appropriate to be used in your homeThe need is not well defined for this bedding item, and as there are is no objective data to support recommendation of any type of specialized bedding, this request is deemed not medically necessary.

Gym membership in community: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG (Low back chapter), Gym membership

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Gym Membership

Decision rationale: The Official Disability Guidelines (ODG) states gym membership is "Not recommended as a medical prescription unless a home exercise program has not been effective and there is a need for equipment. Plus, treatment needs to be monitored and administered by medical professionals." There is no indication in the available record that there has been a failure of home exercise nor that there is a medically supervised gym program available. As such this request is deemed not medically necessary.