

Case Number:	CM14-0192845		
Date Assigned:	11/26/2014	Date of Injury:	11/12/2011
Decision Date:	01/14/2015	UR Denial Date:	10/27/2014
Priority:	Standard	Application Received:	11/18/2014

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 Physical Medicine and Rehabilitation, has a subspecialty in Pain 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:

This is a patient with a date of injury of November 12, 2011. A utilization review determination dated October 27, 2014 recommends non-certification for a tens unit. A Qualified Medical Evaluation dated December 11, 2013 states that there is a request for a tens unit on January 19, 2012. The note indicates that the patient is currently using a Flector patch and a tens unit. A progress report dated August 2, 2014 identifies subjective complaints of low back pain, bilateral shoulder pain, and upper back pain. The note states that "meds and tens treatment help with pain." Objective findings reveal decreased lumbar spine extension. The treatment plan recommends acupuncture, physical therapy, home exercise program, and tens unit. A report dated October 22, 2014 states that the patient's tens unit is broken, "will give a new unit from our office next week." A note entitled "electrical stimulation trial" dated November 3, 2014 states that the patient's pain before treatment was 3/10 and pain after treatment was 3/10. The note then has a box checked indicating "successful in office trial."

IMR ISSUES, DECISIONS AND RATIONALES

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

TENS Unit: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines TENS.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 114-117.

Decision rationale: Regarding the request for TENS, Chronic Pain Medical Treatment Guidelines state that transcutaneous electrical nerve stimulation (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. Guidelines recommend failure of other appropriate pain modalities including medications prior to a TENS unit trial. Prior to TENS unit purchase, one month trial should be documented as an adjunct to ongoing treatment modalities within a functional restoration approach, with documentation of how often the unit was used, as well as outcomes in terms of pain relief and function. Within the documentation available for review, it appears the patient has been using a tens unit for quite some time. There is no documentation indicating how frequently the unit is used, for what duration of time, or any indication of percent reduction in pain, functional improvement, or reduction in medication use. Additionally, a note entitled "electrical stimulation trial" did not show any pain reduction and was a one time in-office trial. Guidelines specifically recommend a 30 day trial prior to providing a tens unit for home use. In the absence of clarity regarding those issues, the currently requested tens unit is not medically necessary.