

<b>Case Number:</b>	CM15-0000092		
<b>Date Assigned:</b>	01/09/2015	<b>Date of Injury:</b>	06/21/2005
<b>Decision Date:</b>	03/09/2015	<b>UR Denial Date:</b>	12/29/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	12/31/2014

### 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: Massachusetts

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Pain Management

### 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 61 year old male who sustained an industrial injury on 6/21/05. The injured worker reported symptoms in the feet. The diagnoses included plantar fasciitis and pain. Treatments to date have included physical therapy, home exercise program, oral pain medication, and orthotics. Provider documentation dated 12/6/13 noted the injured worker presents with an exacerbation in back pain the treating physician is requesting 1 Twin stim-muscle stim/TENS unit. On 12/29/14 The Utilization Review non-certified, of a purchase of 1 Twin stim-muscle stim/TENS unit. The California Medical Treatment Utilization Schedule was cited.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Purchase of Twin stim-muscle stim/TENS unit, bilateral feet:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines 1) Neuromuscular electrical stimulation (NMES devices), p121 (2) Transcutaneous electrotherapy,.

**Decision rationale:** The claimant is nearly 10 years status post work-related injury and continues to be treated for chronic bilateral foot and intermittent low back pain. When seen by the requesting provider, she was having an exacerbation of symptoms. In terms of TENS, a one-month home-based trial may be considered as a noninvasive conservative option. Criteria for the continued use of TENS include documentation of a one-month trial period of the TENS unit including how often the unit was used, as well as outcomes in terms of pain relief. In this case, there is no documented home-based trial of TENS. Therefore the requested TENS unit purchase was not medically necessary.

**One month trial of a standard 2-lead TENS unit for home use for bilateral feet:** Overturned

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines 1) Neuromuscular electrical stimulation (NMES devices), p121 (2) Transcutaneous electrotherapy,.

**Decision rationale:** The claimant is nearly 10 years status post work-related injury and continues to be treated for chronic bilateral foot and intermittent low back pain. When seen by the requesting provider, she was having an exacerbation of symptoms. Transcutaneous electrical nerve stimulation (TENS) is used for the treatment of pain. TENS is thought to disrupt the pain cycle by delivering a different, non-painful sensation to the skin around the pain site. It is a noninvasive, cost effective, self-directed modality. A one-month home-based trial may be considered as a noninvasive conservative option. Therefore the requested one month trial of a standard TENS unit was medically necessary.