

<b>Case Number:</b>	CM15-0189649		
<b>Date Assigned:</b>	10/01/2015	<b>Date of Injury:</b>	07/01/2010
<b>Decision Date:</b>	11/10/2015	<b>UR Denial Date:</b>	09/22/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/25/2015

### 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: California

Certification(s)/Specialty: Preventive Medicine, Occupational 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 56 year old male, who sustained an industrial injury on 7-1-10. The injured worker is being treated for sensory hearing loss. Treatment to date has included bilateral hearing aids. On 8-31-15, the injured worker complains of difficulty in understanding-clarity with current aids. He notes he needs to turn the television volume up and ask family-friends to repeat themselves. Objective findings on 8-31-15 noted a hearing loss level, which can cause difficulty hearing in background noise as well as understanding speech, and consonant sounds of speech following an audiologic evaluation. On 9-15-15 a request for authorization was submitted for a pair of hearing aids. On 9-22-15 a request for 2 Starkey Z series 190 RIC hearing aids was non-certified by utilization review.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**2 Starkey Z Series I90 RIC Hearing aide (1 Pair): Upheld**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Head Chapter.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Head Chapter/Hear Aid Section.

**Decision rationale:** The MTUS guidelines do not address the use of hearing aids. Per the ODG, hearing aids are recommended when indicated. Hearing aids are recommended for any of the following: (1) Conductive hearing loss unresponsive to medical or surgical interventions. (Conductive hearing loss involves the outer and middle ear and is due to mechanical or physical blockage of sound. Usually, conductive hearing loss can be corrected medically or surgically.). (2) Sensorineural hearing loss. (Sensorineural or "nerve" hearing loss involves damage to the inner ear or the 8th cranial nerve. It can be caused by aging, prenatal or birth-related problems, viral or bacterial infections, heredity, trauma, exposure to loud noises, the use of certain drugs, fluid buildup in the middle ear, or a benign tumor in the inner ear.). (3) Mixed hearing loss (conductive hearing loss coupled with sensorineural hearing loss). Hearing aids should be recommended by an otolaryngologist or a qualified audiologist, and prior authorization should be required for hearing aids costing more than ██████ per ear, including hearing aid evaluation, fitting and purchase of hearing aids, once every four years. In this case, the injured worker has documented significant sensorineural hearing loss. There is evidence that he currently has hearing aids but the type and duration of use is not documented. In a recent audiology examination sensorineural hearing loss was confirmed but there was no prior study to confirm a worsening of hearing. Without evidence of length of use or worsening of hearing loss, the request for 2 Starkey Z Series I90 RIC hearing aide (1 pair) is determined to not be medically necessary.