

Case Number:	CM15-0212294		
Date Assigned:	11/02/2015	Date of Injury:	03/08/2012
Decision Date:	12/18/2015	UR Denial Date:	10/06/2015
Priority:	Standard	Application Received:	10/28/2015

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: Pennsylvania

Certification(s)/Specialty: Internal Medicine, Hospice & Palliative 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 40 year old male, who sustained an industrial injury on 3-8-2012. Medical records indicate the worker is undergoing treatment for snoring, insomnia, back pain, lumbar disc disease and obesity. A recent progress report dated 9-28-2015, reported the injured worker complained of 10 months of chest pain, dizziness, excessive sweating and shaking with weight gain due to pain, increased shortness of breath, insomnia, loud snoring and witnessed apnea episodes. Physical examination revealed clear lungs and no use of intercostal muscles with respirations. Treatment to date has included lumbar surgery, physical therapy and medication management. The physician is requesting a sleep study. On 10-6-2015, the Utilization Review noncertified the request for a sleep study.

IMR ISSUES, DECISIONS AND RATIONALES

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

Sleep study: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain, Polysomnography.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Chervin RD, et al. Approach to the patient with excessive daytime sleepiness. Topic 14892, version 13.0. UpToDate, accessed 12/13/2015. Collop N, et al. Home sleep apnea testing for obstructive sleep apnea in adults. Topic 7694, version 21.0. UpToDate, accessed 12/13/2015. Gamaldo CE, et al. Polysomnography in the evaluation of abnormal movements during sleep. Topic 99555, version 2.0. UpToDate, accessed 12/13/2015.

Decision rationale: The MTUS Guidelines are silent on this issue. A sleep study involves a person being connected to a variety of monitoring devices while he or she is asleep in order to measure and record many different body systems during sleep. This test is recommended for those with excessive daytime sleepiness when there is a concern for sleep-related breathing problems, limb movement disorders during sleep, sleep-related neurologic problems, or someone has problems with sleep that are not clear after a thorough history and examination are performed. Performing this study at home has the advantage of convenience, but fewer elements can be measured, which increases the risk of misdiagnosis. The literature and professional guidelines recommend using this approach when there is a high expectation of moderate to severe obstructive sleep apnea and no other medical or sleep problems, to assess the efficacy of an oral device for treatment, or to adjust the pressure therapy if continuous or automatically-adjusting pressure therapy is used. The submitted and reviewed documentation indicated the worker was experiencing problems breathing with any activity, chest pain, dizziness, fatigue, sweating, shaking, snoring, and a concern the worker sometimes stopped breathing while asleep. These records demonstrated the worker had an increased risk of significant sleep-disordered breathing. In light of this supportive evidence, the current request for a sleep study is medically necessary.