

Case Number:	CM14-0093508		
Date Assigned:	07/25/2014	Date of Injury:	01/04/2005
Decision Date:	09/03/2014	UR Denial Date:	06/09/2014
Priority:	Standard	Application Received:	06/19/2014

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 and is licensed to practice in Nevada. 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:

The injured worker is a 65-year-old male who was reportedly injured on January 4, 2005. The mechanism of injury was not listed in these records reviewed. The most recent progress note dated May 30, 2014, indicated that there were ongoing complaints of low back pain. The physical examination demonstrated a borderline hypertensive (133/92) individual who has a decrease in lumbar spine range of motion. No specific neurological findings were reported. Diagnostic imaging studies objectified lower extremity fractures, degenerative disc disease in the thoracic spine, and degenerative changes to the left knee. Previous treatment included transcutaneous electrical nerve stimulation (TENS) unit, multiple medications and pain interventions. A request was made for TENS unit and was not certified in the pre-authorization process on June 9, 2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Nexwave TENS unit dispensed for purchase RETRO 01/23/2013 QTY 1: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines 8 C.C.R. 9792.20 - 9792.26. MTUS (Effective July 18, 2009) Page(s): 113-116.

Decision rationale: The California Medical Treatment Utilization Schedule recommends against using a transcutaneous electrical nerve stimulation (TENS) unit as a primary treatment modality and indicates that a one-month trial must be documented prior to purchase of the unit. Based on the clinical documentation provided, the TENS unit is being used as a primary treatment modality and there is no documentation of any efficacy with the use of this unit. When noting the pain levels reported, the date of injury, the current physical examination, there does not appear to be any medical necessity for this device.

Electrodes for 4 packages per month for 16 months QTY 64 RETRO 01/23/2013-05/22/2014: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines 8 C.C.R. 9792.20 - 9792.26. MTUS (Effective July 18, 2009) Page(s): 113-116.

Decision rationale: In that the underlying request is not medically necessary, the supplies to the request are also not medically necessary.

Batteries for 4 packages per month for 16 months QTY 64 RETRO 01/23/2013- 05/22/2014: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines 8 C.C.R. 9792.20 - 9792.26. MTUS (Effective July 18, 2009) Page(s): 113-116.

Decision rationale: In that the underlying request is not medically necessary, the supplies to the request are also not medically necessary.