

<b>Case Number:</b>	CM14-0213044		
<b>Date Assigned:</b>	12/31/2014	<b>Date of Injury:</b>	09/23/2013
<b>Decision Date:</b>	02/27/2015	<b>UR Denial Date:</b>	12/11/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	12/19/2014

### 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. 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: Ohio, North Carolina, Virginia  
Certification(s)/Specialty: Family Practice

### 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 31 year old female with a date of injury of 9-23-2013. While at work, she bit into a salad which contained a rock resulting in fractures of 2 teeth. She subsequently developed headaches and jaw pain that have resulted in a rapid 80 pound weight loss. Her skin is sagging and her bony protuberances have become more prominent and painful resulting in pain to the tailbone region when sitting more than 30 minutes. This has resulted in difficulty getting to and from her subspecialty appointments. She has tried regular pillows and blankets to cushion but they have been ineffective. The diagnoses include temporomandibular joint syndrome, occipital neuralgia, and fibromyalgia. At issue is a request for a seat cushion for driving. This was previously non-certified citing ODG guidelines for durable medical equipment.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Seat cushion for tailbone for car:** 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

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Knee and Leg, Durable medical equipment (DME)

**Decision rationale:** Durable medical equipment is recommended generally if there is a medical need and if the device or system meets Medicare's definition of durable medical equipment (DME) below. Most bathroom and toilet supplies do not customarily serve a medical purpose and are primarily used for convenience in the home. Medical conditions that result in physical limitations for patients may require patient education and modifications to the home environment for prevention of injury, but environmental modifications are considered not primarily medical in nature. Certain DME toilet items (commodes, bed pans, etc.) are medically necessary if the patient is bed- or room-confined, and devices such as raised toilet seats, commode chairs, sitz baths and portable whirlpools may be medically necessary when prescribed as part of a medical treatment plan for injury, infection, or conditions that result in physical limitations. Many assistive devices, such as electric garage door openers, microwave ovens, and golf carts, were designed for the fully mobile, independent adult, and Medicare does not cover most of these items. The term DME is defined as equipment which: (1) Can withstand repeated use, i.e., could normally be rented, and used by successive patients; (2) Is primarily and customarily used to serve a medical purpose; (3) Generally is not useful to a person in the absence of illness or injury; & (4) Is appropriate for use in a patient's home. In this instance, the injured worker has skin regions which are at risk for pressure ulceration as a consequence of her rapid weight loss. She requires cushioning to get to physician offices for medical treatment. The cushioning could certainly also be used at home to prevent coccygeal skin breakdown. Consequently, seat cushion for tailbone for car is medically appropriate and necessary.