

Case Number:	CM15-0065084		
Date Assigned:	04/13/2015	Date of Injury:	03/19/2014
Decision Date:	05/13/2015	UR Denial Date:	03/30/2015
Priority:	Standard	Application Received:	04/06/2015

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: 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 52 year old male, who sustained an industrial/work injury on 3/19/14. He reported initial complaints of anterior left shoulder pain. The injured worker was diagnosed as having partial tear of the supraspinatus tendon with subacromial bursitis, tenosynovitis, and tendinitis. Treatment to date has included medication, orthopedic consultation, physical therapy, steroid injections, and conservative measures. MRI results were reported on 6/9/14. FluroScan x-ray results were reported a type III acromial configuration with moderate acromioclavicular joint degenerative changes. Currently, the injured worker complains of severe left shoulder pain, particularly at night with sleep. Per the physician's report of 3/6/15, examination noted left shoulder scapulothoracic glenohumeral dysrhythmia/scapular dyskinesia with a very painful arc of motion abduction greater than forward flexion. Impingement was positive. The requested treatments include Posture Shirt for purchase and Spinal Q Vest for purchase.

IMR ISSUES, DECISIONS AND RATIONALES

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

Posture Shirt for purchase: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) (1) Shoulder (Acute & Chronic), IntelliSkin posture garments (2) Low Back - Lumbar & Thoracic (Acute & Chronic), Posture garments.

Decision rationale: The claimant is more than one year status post work-related injury and continues to be treated for left shoulder pain. When seen, he had decreased and painful shoulder range of motion with positive impingement testing. A posture garments is not recommended. Posture garments conform to the back and shoulders as a second skin, intended to gradually reshape these areas for improved posture, athletic performance and to lessen pain. There are no quality published studies to support these claims.

Spinal Q Vest for purchase: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) (1) Shoulder (Acute & Chronic), IntelliSkin posture garments (2) Low Back - Lumbar & Thoracic (Acute & Chronic), Posture garments.

Decision rationale: The claimant is more than one year status post work-related injury and continues to be treated for left shoulder pain. When seen, he had decreased and painful shoulder range of motion with positive impingement testing. A posture garments is not recommended. Posture garments conform to the back and shoulders as a second skin, intended to gradually reshape these areas for improved posture, athletic performance and to lessen pain. There are no quality published studies to support these claims.