

Case Number:	CM15-0098145		
Date Assigned:	05/29/2015	Date of Injury:	03/09/2012
Decision Date:	07/02/2015	UR Denial Date:	04/28/2015
Priority:	Standard	Application Received:	05/21/2015

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: Texas, New York, 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 applicant is a represented 54-year-old who has filed a claim for chronic shoulder, mid back, wrist, neck, and hand pain reportedly associated with an industrial injury of March 9, 2012. In a Utilization Review report dated April 20, 2015, the claims administrator failed to approve requests for supplies for a TENS unit and supplies for a paraffin wax device. The claims administrator referenced a RFA form received on April 27, 2015 in its determination. The applicant's attorney subsequently appealed. In a progress note dated May 13, 2015, the applicant reported ongoing complaints of shoulder, forearm, and neck pain. The applicant was using Lyrica, Duexis, tramadol, and Lidoderm patches for pain relief. The applicant was in significant pain and was apparently lying down in bed in the exam room. The attending provider reiterated his request for TENS unit supplies and paraffin wax bath supplies. Trigger point injections were sought. The applicant had undergone earlier shoulder surgery, earlier elbow surgery, and earlier wrist surgery, it was stated. The applicant's permanent work restrictions were renewed. It did not appear that the applicant was working with said limitations in place, although this was not clearly stated. On September 10, 2014, it was acknowledged that the applicant was no longer working and had reportedly "retired", seemingly as a result of his various chronic pain constraints. Acupuncture, Duexis, Lidoderm patches, tramadol, Lyrica, continued usage of the TENS device, continued usage of the paraffin wax device were sought while the applicant is permanent's work restrictions were renewed. The applicant acknowledged that even simple activities of daily living, including personal and grooming activities, remained problematic owing to his manifold pain complaints.

IMR ISSUES, DECISIONS AND RATIONALES

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

Supplies for TENS unit, Paraffin wax, x 1 yr supplies: Upheld

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 264; 271, Chronic Pain Treatment Guidelines Criteria for the use of TENS; Physical Medicine Page(s): 116; 98.

Decision rationale: No, the request for supplies for a TENS unit was not medically necessary, medically appropriate, or indicated here. As noted on page 116 of the MTUS Chronic Pain Medical Treatment Guidelines, usage of a TENS unit beyond an initial one-month trial and, by implication, provision of the associated supplies should be predicated on evidence of favorable outcome during said one-month trial, with favorable outcomes evident in terms of both pain relief and function. Here, however, the applicant was off work, despite ongoing usage of the TENS unit. The applicant continued to report difficulty-performing activities of daily living as basic as self-care, personal hygiene, grooming, gripping, and grasping, it was reported above. Ongoing usage of the TENS unit failed to curtail the applicant's dependence on various sundry analgesic and adjuvant medications, including Lyrica, Lidoderm patches, tramadol, and Duexis. Permanent work restrictions were renewed, unchanged, from visit to visit, resulting in the applicant's removal from the workplace. All of the foregoing, taken together, suggested a lack of functional improvement as defined in MTUS 9792.20e, despite ongoing usage of the TENS unit. Therefore, the request for associated TENS unit supplies was likewise not medically necessary. Similarly, the request for a one year's worth of supplies for the paraffin wax device was likewise not medically necessary, medically appropriate, or indicated here. As noted on page 98 of the MTUS Chronic Pain Medical Treatment Guidelines, passive modalities such as the paraffin wax device should be employed "sparingly" during the chronic pain phase of the claim. Here, however, the concurrent request for multiple different passive modalities, including the TENS unit also at issue, the paraffin wax device, and acupuncture, taken together, suggested a reliance on passive modalities which runs counter to the philosophy espoused on page 98 of the MTUS Chronic Pain Medical Treatment Guidelines. The MTUS Guideline in ACOEM Chapter 11, Table 11-7, page 271 also notes that passive modalities such as the paraffin device are "not recommended" in the evaluation and/or management of forearm, wrist, and/or hand complaints as were/are present here. While the MTUS Guideline in ACOEM Chapter 11, Table 11-4, page 264 does recommend at-home local applications of heat packs as methods of symptom control for forearm, wrist, and hand complaints, as were/are present here, by analogy, ACOEM does not support more elaborate devices for delivering heat therapy such as the paraffin wax device at issue. Therefore, the request for supplies for paraffin wax unit was likewise not medically necessary. Since both the TENS unit supplies and paraffin unit supplies component (s) of the request were not indicated, the request was not medically necessary.