

Case Number:	CM14-0151030		
Date Assigned:	09/19/2014	Date of Injury:	07/03/1997
Decision Date:	11/03/2014	UR Denial Date:	09/05/2014
Priority:	Standard	Application Received:	09/16/2014

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 Pain Management and is licensed to practice in California. 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 66 year old female with a date of injury on 7/3/1997. She was evaluated by her treating physician on 9/2/14 at which time she did not have sufficient electrodes for her transcutaneous electrical nerve stimulation unit, which she uses to help reduce her pain level. Her medications include Norco, Omeprazole, and Calcium. She uses the transcutaneous electrical nerve stimulation unit on a daily basis and requires additional electrodes because of the inability to reuse them due to the fact that they do not sufficiently adhere to her skin with reuse. Physical examination showed decreased range of motion of the cervical spine with painful motion. Her diagnoses included shoulder pain, cervical spine spondylosis, and muscle spasm. Per the treating physician note, the injured worker's neck, shoulder and forearm pain have been stable and Norco has been decreased since she is using the transcutaneous electrical nerve stimulation unit versus pain medication. The injured worker is also performing home exercises and her current treatment program is allowing her to perform her activities of daily living with decreased pain.

IMR ISSUES, DECISIONS AND RATIONALES

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

Electrodes for TENS (transcutaneous electrical nerve stimulation) unit (1 month supply), left shoulder, cervical: Overturned

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints, Chapter 9 Shoulder Complaints, Chronic Pain Treatment Guidelines TENS (transcutaneous electrical nerve stimulation).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Transcutaneous electrotherapy, Page(s): 114-116. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back - Lumbar & Thoracic (Acute & Chronic), Transcutaneous electrical nerve stimulation

Decision rationale: The injured worker was initially injured on 7/3/97 and has been using a combination of transcutaneous electrical nerve stimulation unit, pain medication, and home exercise to decrease her shoulder, neck, and forearm pain. Per the documentation provided, the transcutaneous electrical nerve stimulation unit has allowed the worker to decrease the use of pain medication, decrease pain, and improve function in terms of performing her activities of daily living. She uses the transcutaneous electrical nerve stimulation unit on a daily basis and requires additional electrodes since they are not reusable. Therefore, the electrodes required for operation of the transcutaneous electrical nerve stimulation unit are medically necessary. The denial states that documentation is required as to why the injured worker's skin does not allow the electrode pad to adhere properly. Reviewing the documentation provided indicates that the treating physician asked for additional electrodes because they are not reusable and therefore would not adequately adhere to the injured worker's skin.