

Case Number:	CM13-0001524		
Date Assigned:	11/08/2013	Date of Injury:	09/12/2012
Decision Date:	06/16/2014	UR Denial Date:	07/09/2013
Priority:	Standard	Application Received:	07/15/2013

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 Occupational Medicine 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 applicant is a represented [REDACTED] employee who has filed a claim for neck pain, posttraumatic stress disorder, and posttraumatic headaches reportedly associated with an industrial injury of September 12, 2012. Thus far, the applicant has been treated with the following: Analgesic medications; unspecified amounts of physical therapy; MRI imaging of the cervical spine of January 29, 2014, notable for a disk protrusion generating associated neuroforaminal compromise at C5-C6; and reported return to regular work. In a Utilization Review Report of July 5, 2013, the claims administrator denied a request for neurology consultation and an MRI of the head and brain, stating that the attending provider did not furnish any clinical progress notes along with the request for authorization. The applicant's attorney subsequently appealed. A June 24, 2013 progress note is notable for comments that the applicant reported persistent neck pain, headaches, and paresthesias about the hands. The applicant exhibited altered sensorium about the fingertips and associated dysesthesias on exam. A neurology consultation was endorsed for post-concussive syndrome versus headaches of unknown etiology. An MRI of the head and brain was also sought while the applicant was asked to return to regular work.

IMR ISSUES, DECISIONS AND RATIONALES

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

CONSULTATION NEUROLOGY: Overturned

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines PART 1: INTRODUCTION, PAGE 1. .

Decision rationale: The Chronic Pain Guidelines indicate that the presence of persistent complaints which prove contrary to conservative management should lead the primary treating provider to reconsider the operating diagnosis and determine whether a specialist evaluation is necessary. In this case, the applicant does in fact have longstanding complaints of headaches, paresthesias, and dysesthesias of unknown etiology. Obtaining the added expertise of a physician specializing in the management of the same, namely a neurologist, is indicated and appropriate. Therefore, the request is medically necessary.

MRI HEAD AND BRAIN: Overturned

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 AMERICAN COLLEGE OF RADIOLOGY (ACR), PRACTICE GUIDELINES FOR THE PERFORMANCE AND INTERPRETATION OF MRI OF THE BRAIN.

Decision rationale: As noted by the American College of Radiology (ACR), indications for MRI imaging of the brain include posttraumatic brain injury. In this case, the applicant has persistent complaints of headache several months removed from an industrial head contusion injury. Obtaining MRI imaging to clearly delineate the extent of the same is indicated and appropriate. In this case, the applicant has longstanding complaints of headache, with no clear etiology. Both neurological and psychiatric etiologies have been suggested. MRI imaging to clearly delineate or distinguish between the same is indicated. Therefore, the request is medically necessary.