MAXIMUS Federal Services

Case Number:	CM13-0056104		
Date Assigned:	04/25/2014	Date of Injury:	09/16/2003
Decision Date:	07/07/2014	UR Denial Date:	10/23/2013
Priority:	Standard	Application Received:	11/21/2013

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 Emergency Medicine and is licensed to practice in New York. 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 patient is a 51-year-old female who was injured on September 16, 2003. The patient continued to experience pain in her neck and upper extremity. Physical examination was notable for spasms and pain in bilateral trapezius muscles, intact sensation and 5/5 motor strength in the right upper extremity. Diagnoses included status post posterior fusion of the cervical spine, status post anterior fusion of the cervical spine, status post posterior foraminotomy of the cervical spine, and chronic neck pain. Treatment included medications and home exercise. Request for authorization for cervical collar was submitted for consideration.

IMR ISSUES, DECISIONS AND RATIONALES

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

CERVICAL COLLAR: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 175.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 175.

Decision rationale: Cervical collars have not been shown to have any lasting benefit, except for comfort in the first few days of the clinical course in severe cases; in fact, weakness may result from prolonged use and will contribute to debilitation. Immobilization using collars and

prolonged periods of rest are generally less effective than having patients maintain their usual, "preinjury" activities. In this case the patient's injury occurred over 10 years ago. The period of time when the cervical collar could have provided comfort has expired. The cervical collar has no benefit and may cause harm. Therefore, the request for cervical collar is not medically necessary and appropriate.

GP FOLLOW-UPS FOR HEADACHES: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 92. Decision based on Non-MTUS Citation ACOEM Guidelines, Chapetr7 Independent Medical Examination in Consultations, page 127.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Head, Office visits.

Decision rationale: Office visits are recommended as determined to be medically necessary. Evaluation and management outpatient visits to the offices of medical doctor(s) play a critical role in the proper diagnosis and return to function of an injured worker, and they should be encouraged. The need for a clinical office visit with a health care provider is individualized based upon a review of the patient concerns, signs and symptoms, clinical stability, and reasonable physician judgment. The determination is also based on what medications the patient is taking, since some medicines such as opiates, or medicines such as certain antibiotics, require close monitoring. In this case the patient had been experiencing headaches daily for one year. The maximum number of outpatient visits for outpatient consult of medium complexity is one. Medical necessity for more than one visit is not established. Therefore, the request for General Practitioner follow-ups for headaches is not medically necessary and appropriate.