

Case Number:	CM13-0060930		
Date Assigned:	12/30/2013	Date of Injury:	11/01/2011
Decision Date:	06/19/2014	UR Denial Date:	11/21/2013
Priority:	Standard	Application Received:	12/04/2013

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 Orthopedic Surgery, 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 patient is a 54-year-old with industrial injury November 11, 2011. Exam note October 14, 2013 demonstrates low back and right leg pain and numbness. Exam demonstrates 5/5 strength with intact sensation and positive straight leg raise on the right. Exam note October 4, 2013 demonstrates low back and right hip pain. MRI May 26, 2013 demonstrates multilevel disc degeneration L3-S1 without nerve root impingement. No evidence of instability on radiographic examination.

IMR ISSUES, DECISIONS AND RATIONALES

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

L4-5 XTREME LUMBAR INTERBODY FUSION WITH TRANSFORAMINAL INTERBODY FUSION WITH POSTERIOR SPINAL FUSION: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: ACOEM PRACTICE GUIDELINES, 2ND EDITION (2004), CHAPTER 12 - LOW BACK COMPLAINTS, PAGES 305-307

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: AMERICAN COLLEGE OF OCCUPATIONAL AND ENVIRONMENTAL MEDICINE (ACOEM), 2ND EDITION, (2004), LOW BACK COMPLAINTS, PAGE 307-308

Decision rationale: According to the Low Back Complaints Chapter of the ACOEM Practice Guidelines, "Patients with increased spinal instability (not work-related) after surgical decompression at the level of degenerative spondylolisthesis may be candidates for fusion. There is no scientific evidence about the long-term effectiveness of any form of surgical decompression or fusion for degenerative lumbar spondylosis compared with natural history, placebo, or conservative treatment." In this case there is no evidence of instability. The MRI of the lumbar spine from May 26, 2013 demonstrates multilevel disc degeneration without neural impingement. As there is no evidence of instability, there is no indication for the proposed lumbar fusion. The request for L4-L5 Xtreme Lumbar Interbody Fusion with transforaminal interbody fusion with posterior spinal fusion is not medically necessary or appropriate.

PRE OP LABS/EKG: Upheld

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

MAXIMUS guideline: The Expert Reviewer did not cite any medical evidence for its decision.

Decision rationale: Since the primary procedure is not medically necessary, none of the associated services are medically necessary.

POST OP PT X 12 VISITS: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: POST SURGICAL TREATMENT GUIDELINES, ,

MAXIMUS guideline: The Expert Reviewer did not cite any medical evidence for its decision.

Decision rationale: Since the primary procedure is not medically necessary, none of the associated services are medically necessary.