

Case Number:	CM14-0101227		
Date Assigned:	09/24/2014	Date of Injury:	04/01/2003
Decision Date:	11/13/2014	UR Denial Date:	06/18/2014
Priority:	Standard	Application Received:	07/01/2014

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 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 chronic neck pain reportedly associated with cumulative trauma at work between the dates of October 16, 2011 through April 1, 2013. Thus far, the applicant has been treated with the following: Analgesic medications; transfer of care to and from various providers in various specialties; unspecified amounts of physical therapy; and extensive periods of time off of work. In a Utilization Review Report dated June 18, 2014, the claims administrator denied a request for a trial of spinal cord stimulator implantation, citing lack of supporting information on the part of the attending provider. The claims administrator stated that the attending provider had not furnished progress notes, which would support or substantiate the request. The applicant's attorney subsequently appealed. In a May 20, 2014 request for authorization (RFA) form, authorization was sought for Tylenol No. 3, Norflex, Colace, Neurontin, Lactulose, and a trial of spinal cord stimulator implantation. In a February 26, 2014 work status report, the applicant was placed off work, on total temporary disability through April 8, 2014. In a progress note of the same date, February 26, 2014, it was acknowledged that the applicant was not working. Persistent complaints of neck pain radiating to the bilateral upper extremities was noted. The applicant had issues with tremor. The applicant was dropping objects. The applicant's neck and back pain were unchanged. Psychological evaluation and spinal cord stimulator trial were sought. Multiple medications were renewed. The remainder of the file was surveyed. There was no concrete evidence that the applicant had completed a psychological evaluation. It did not appear, however, that the claims administrator had incorporated a May 20, 2014 progress note into the IMR packet.

IMR ISSUES, DECISIONS AND RATIONALES

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

Trial Spinal Cord Stimulator Implant: Upheld

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 Psychological Evaluation, IDDS & SCS; Indications for Stimulator Implantation Page(s): 101; 107.

Decision rationale: No, the request for a trial of spinal stimulator implantation is not medically necessary, medically appropriate, or indicated here. While page 107 of the MTUS Chronic Pain Medical Treatment Guidelines does acknowledge that indication for spinal cord stimulator implantation includes failed back syndrome, complex regional pain syndrome, Post Amputation pain, post herpetic neuralgia, spinal cord injury and dysesthesias, pain associated with multiple sclerosis, and/or peripheral vascular disease, in this case, however, it was not clearly stated what diagnosis or diagnoses the attending provider was pursuing the spinal cord implantation for. Neither the RFA form dated May 20, 2014 nor any of attached handwritten progress notes clearly identified for what diagnosis the attending provider was seeking the spinal cord stimulator trial. It is further noted that page 101 of the MTUS Chronic Pain Medical Treatment Guidelines does recommend that a psychological evaluation be performed prior to spinal cord stimulator trial. In this case, there is no concrete evidence on file that the applicant had, in fact, undergone a successful psychological evaluation before the spinal cord stimulator trial was requested. Therefore, the request is not medically necessary.