

Case Number:	CM14-0155351		
Date Assigned:	09/25/2014	Date of Injury:	05/30/2013
Decision Date:	10/27/2014	UR Denial Date:	08/26/2014
Priority:	Standard	Application Received:	09/23/2014

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 Medicine and is licensed to practice in Minnesota. 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 58-year-old female who reported an injury on 05/30/2013. The injury reportedly occurred when a giant flat screen TV fell onto her head and back. The injured worker's diagnoses included cervical sprain, shoulder impingement, lumbar radiculopathy, and derangement of joint not otherwise specified of shoulder, and post concussion syndrome. The injured worker's past treatments included acupuncture, medications, and physical therapy. The injured worker's diagnostic testing included a cervical MRI, which was noted to reveal multiple levels of disc protrusion with neural foraminal narrowing at C6-7. A cervical spine x-ray was noted to reveal discogenic disease seen at C4-7 with suggestion of associated bilateral foraminal encroachment. There were no relevant surgeries documented. On 08/08/2014, the injured worker complained of pain to her head, neck, shoulder, back, and leg. She reported that she felt better than before, but was still in pain. She reported a change in pain from 9/10 to 7/10 to 8/10. Upon physical examination, the injured worker was noted to have reduced pain upon palpation compared to the first visit. The injured worker's medications were not in the documentation. The request was for massage therapy. The rationale for the request was not provided. The Request for Authorization form was not submitted for review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Massage therapy: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Massage Therapy Page(s): 60.

Decision rationale: The request for massage therapy is not medically necessary. The California MTUS Guidelines may recommend massage therapy as an adjunct to other recommended treatment, and it should be limited to 4 to 6 visits in most cases. The strongest evidence of benefits of massage is for stress and anxiety reduction. Massage is an effective adjunct treatment to relieve acute postoperative pain in patients who had major surgery, according to the results of a randomized controlled trial recently published. The injured worker was noted to have pain; however, the injured worker did not have documentation of a major surgery. The documentation did not provide sufficient evidence that the injured worker would be participating in an adjunct treatment modality, or had plans to begin a new recommended treatment. The guidelines state that it should be limited to 4 to 6 visits, as the request is written; there was no specified number of visits. In the absence of documentation with evidence of a major surgery, documentation indicating that the injured worker would be participating in an adjunct recommended treatment, and a specified number of visits requested, the request is not supported at this time. Therefore, the request is not medically necessary.