

Case Number:	CM14-0155357		
Date Assigned:	09/25/2014	Date of Injury:	05/01/2010
Decision Date:	12/10/2014	UR Denial Date:	09/05/2014
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 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:

According to the records made available for review, this is a 46-year-old female with a 5/1/10 date of injury. At the time (8/8/14) of request for authorization for Aqua therapy 3x4 to the neck and Cervical X-ray, there is documentation of subjective (increased neck pain) and objective (tenderness to palpitation over the cervical spine, decreased range of motion of the cervical spine, and positive Spurling maneuver on the left) findings. The current diagnoses include chronic cervicgia, spasmodic torticollis, bilateral upper extremity radicular pain, and neuropathic pain. The treatment to date includes TENS unit, epidural steroid injection, physical therapy, and medications. Regarding Aqua therapy 3x4 to the neck, there is no documentation of an indication for which reduced weight bearing is desirable (extreme obesity, need for reduced weight bearing, or recommendation for reduced weight bearing). Regarding Cervical X-ray, there is no documentation of emergence of red flag, physiological evidence of tissue insult or neurologic dysfunction, failure to progress in a strengthening program intended to avoid surgery, or clarification of anatomy prior to an invasive procedure.

IMR ISSUES, DECISIONS AND RATIONALES

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

Aqua therapy 3x4 to the neck: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Aquatic Therapy.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Physical Medicine, Aquatic therapy Page(s): 98, 22. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Neck & Upper Back, Aquatic Therapy

Decision rationale: The MTUS Chronic Pain Medical Treatment Guidelines identifies that aquatic therapy is recommended where reduced weight bearing is desirable (such as extreme obesity, need for reduced weight bearing, or recommendation for reduced weight bearing). The MTUS Chronic Pain Medical Treatment Guidelines support a brief course of physical medicine for patients with chronic pain not to exceed 10 visits over 4-8 weeks with allowance for fading of treatment frequency, with transition to an active self-directed program of independent home physical medicine/therapeutic exercise. The ODG identifies visits for up to 9 visits over 8 weeks in the management of cervicalgia. Within the medical information available for review, there is documentation of diagnoses of chronic cervicalgia, spasmodic torticollis, bilateral upper extremity radicular pain, and neuropathic pain. However, there is no documentation of an indication for which reduced weight bearing is desirable (extreme obesity, need for reduced weight bearing, or recommendation for reduced weight bearing). Therefore, based on guidelines and a review of the evidence, the request for Aqua therapy 3x4 to the neck is not medically necessary.

Cervical X-ray: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Aquatic Therapy.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 177-178. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Neck & Upper Back, Radiology

Decision rationale: The MTUS reference to ACOEM guidelines identifies documentation of emergence of red flag, physiological evidence of tissue insult or neurologic dysfunction, failure to progress in a strengthening program intended to avoid surgery, or clarification of anatomy prior to an invasive procedure. The ODG identifies documentation of cervical spine trauma, unconscious, impaired sensorium (including alcohol and/or drugs), multiple trauma, a serious bodily injury, neck pain, no neurological deficit, cervical tenderness, paresthesias in hands or feet; Chronic neck pain (= after 3 months conservative treatment), patient younger than 40, no history of trauma, first study; history of remote trauma, first study; patient older than 40, no history of trauma, first study, history of remote trauma, first study, patients of any age, history of previous malignancy, first study; patients of any age, history of previous remote neck surgery, first study; Post-surgery: evaluate status of fusion, as additional criteria necessary to support the medical necessity of cervical spine x-rays. Within the medical information available for review, there is documentation of diagnoses of chronic cervicalgia, spasmodic torticollis, bilateral upper extremity radicular pain, and neuropathic pain. However, there is no documentation of emergence of red flag, physiological evidence of tissue insult or neurologic dysfunction, failure to progress in a strengthening program intended to avoid surgery, or clarification of anatomy prior to an invasive procedure. Therefore, based on guidelines and a review of the evidence, the request for Cervical X-ray to the neck is not medically necessary.

