

Case Number:	CM14-0174643		
Date Assigned:	10/27/2014	Date of Injury:	02/20/2014
Decision Date:	12/04/2014	UR Denial Date:	09/23/2014
Priority:	Standard	Application Received:	10/21/2014

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 shoulder pain reportedly associated with an industrial contusion injury of February 20, 2014. Thus far, the applicant has been treated with the following: Analgesic medications; transfer of care to and from various providers in various specialties; and unspecified amounts of physical therapy over the course of the claim. In a Utilization Review Report dated September 23, 2014, the claims administrator denied a request for shoulder MR arthrogram, invoking non-MTUS ODG Guidelines in its denial. The applicant's attorney subsequently appealed. In a June 30, 2014 progress note, the applicant reported ongoing complaints of right shoulder pain. The applicant had had shoulder injection demonstrating only partial improvement. Earlier non-contrast MRI imaging of the shoulder demonstrated a small partial intrasubstance subscapularis tear, it was stated. Full range of motion about the shoulder was noted with positive provocative testing. The attending provider suggested that an MR arthrogram of the shoulder be performed to evaluate for other occult pathology. It was stated that the applicant's operating diagnosis at present was biceps tendonopathy versus subluxation.

IMR ISSUES, DECISIONS AND RATIONALES

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

MR Athrogram for the right shoulder: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Treatment Index, 121Edition (web) , 2014,Shoulder Chapter, MR arthrogram

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Practice Guidelines, Third Edition, Shoulder Chapter, MR Arthrogram section.

Decision rationale: The MTUS does not address the topic of shoulder MR arthrography. However, as noted in the Third Edition ACOEM Guidelines Shoulder Chapter, MR arthrography is recommended for diagnosing articular-sided, partial-thickness rotator cuff tears, subscapularis tear, and labral tears in select applicants with subacute or chronic shoulder pain. In this case, the attending provider stated that earlier noncontrast shoulder MRI imaging has been non-diagnostic/equivocal/failed to uncover a clear source for the applicant's pathology. Some of the applicant's presentation, including mechanical symptoms of locking and positive provocative testing, appreciated on the office visit in question do call into question possible labral pathology which MR arthropathy could be potentially helpful in uncovering, per ACOEM. The MR arthrography in question would likely influence the treatment plan, as it appears that the applicant is in the process of contemplating shoulder surgery. Therefore, the request is medically necessary.