MAXIMUS Federal Services

Case Number:	CM14-0028517		
Date Assigned:	06/16/2014	Date of Injury:	12/04/2013
Decision Date:	12/03/2014	UR Denial Date:	02/12/2014
Priority:	Standard	Application Received:	03/06/2014

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 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 mid and low back pain reportedly associated with industrial injury of December 4, 2013. Thus far, the applicant has been treated with the following: Analgesic medications; unspecified amounts of physical therapy; and work restrictions. In a Utilization Review Report dated February 12, 2014, the claims administrator denied a request for MRI imaging of the thoracolumbar spine and MRI imaging of the lumbosacral spine. The applicant's attorney subsequently appealed. In a January 20, 2014 progress note, the applicant reported ongoing complaints of neck and upper back pain. Tenderness and limited range of motion was noted about various regions of the spine. Tramadol, Flexeril, and physical therapy were endorsed. The applicant was asked to obtain MRI imaging of the cervical spine, thoracolumbar spine, lumbosacral spine without contrast. The attending provider's documentation was quite sparse. The attending provider seemingly suggested that he was ordering the MRI on the applicant's request.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI OF THE THORACOLUMBAR SPINE WITHOUT CONTRAST: Upheld

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 304.

Decision rationale: As noted in the MTUS-adopted ACOEM Guidelines in Chapter 12, page 304, imaging studies should be reserved for cases in which surgery is being considered or red flag diagnoses are being evaluated. In this case, however, there was no mention of the applicant's actively considering or contemplating any kind of surgical intervention involving the thoracolumbar spine on and around the date in question. There was no mention of any focal upper or lower extremity neurologic deficits, which would compel earlier thoracolumbar MRI imaging. Rather, it appears that the attending provider was performing MRI imaging of various body parts on a routine basis, with no clear intention of acting on the results of the same. The studies, it is further noted, were seemingly initiated largely at the behest and request of the applicant, it was further suggested. Therefore, the request is not medically necessary.

MRI OF THE LUMBOSACRAL SPINE WITHOUT CONTRAST: Upheld

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 304.

Decision rationale: As noted in the MTUS-adopted ACOEM Guidelines in Chapter 12, page 304, imaging studies should be reserved for cases in which surgery is being considered or red flag diagnoses are being evaluated. In this case, however, there is no mention of the applicant's actively considering or contemplating any kind of surgical intervention involving the lumbosacral spine on and around the date in question. The fact that MRI imaging of numerous body parts was sought implied that the attending provider was intent on ordering routine MRI imaging studies, with no clear intent of acting on the results of the same. Therefore, the request is not medically necessary.