

Case Number:	CM14-0031496		
Date Assigned:	04/09/2014	Date of Injury:	10/25/2008
Decision Date:	05/28/2014	UR Denial Date:	01/06/2014
Priority:	Standard	Application Received:	02/04/2014

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 has filed a claim for headaches, neck pain, bilateral hand pain, low back pain, and bilateral foot pain reportedly associated with an industrial injury of October 25, 2008. Thus far, the applicant has been treated with the following: analgesic medications; attorney representation; and extensive periods of time off of work. In a Utilization Review Report of January 6, 2014, the claims administrator denied a request for brain MRI (magnetic resonance imaging), citing non-MTUS Official Disability Guidelines (ODG). The claims administrator stated that the attending provider did not document the presence of any acute changes and further stated that they felt the applicant's symptoms were likely a sequela of his 2008 injury. The claims administrator also stated that the attending provider did not furnish the results of any prior imaging studies (if any). A December 17, 2013 progress note was notable for comments that the applicant reported a variety of complaints associated with a fall from a height of 30 feet while working as a gardener. The applicant was reportedly unconscious and hospitalized for 15 days following the fall. The applicant reported persistent neck pain, upper extremity pain, and headaches. The applicant is off of work, it is acknowledged. There was some right upper extremity weakness appreciated, scored at 4/5. The applicant is described as having reportedly had a head injury and is having issues with memory deficits, it is stated. Authorization was sought for x-rays and MRI imaging of the cervical spine along with an MRI of the brain while the applicant was again placed off of work.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI WITH CONTRAST OF THE BRAIN: 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), MRI (magnetic resonance imaging).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Radiology (ACR), Practice Guideline for the Performance and Interpretation of MRI of the brain. Revised 2013 (Resolution 6).

Decision rationale: The MTUS does not address the topic. As noted by the American College of Radiology, primary indications for brain MRI (magnetic resonance imaging), include evidence of trauma and/or headaches, as apparently are present here. In this case, the applicant has longstanding complaints of headaches apparently associated with an industrial contusion injury. Obtaining MRI imaging to further evaluate the same is indicated, appropriate, and supported by the American College of Radiology (ACR). Therefore, the original utilization review decision is overturned. The request is approved, on Independent Medical Review.