

Case Number:	CM14-0034624		
Date Assigned:	06/20/2014	Date of Injury:	10/09/2004
Decision Date:	07/18/2014	UR Denial Date:	03/13/2014
Priority:	Standard	Application Received:	03/20/2014

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 Orthopedic Surgery and is licensed to practice in New York. 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 patient is a 48 year old male with a date of injury at October 9, 2004. The patient has chronic neck pain. Surgery was performed on the cervical spine by [REDACTED]. Possible need for c6-t1 additional fusion was discussed. A CT scan in 2013 shows laminectomy at c4-5 with instability with some degeneration noted at c6-7. PE shows decreased neck rom. Muscle strength 4/5 with intact sensation. The patient evaluated by an in-plan surgeon, but wants to return to original surgeon office.

IMR ISSUES, DECISIONS AND RATIONALES

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

Surgical Follow-up appointment with [REDACTED]: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Page(s): 127.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 2 General Approach to Initial Assessment and Documentation Page(s): 127.

Decision rationale: There is no medical necessity to follow up with [REDACTED]. In plan spien specialist is qualified to provide care. This is a routine degenerative neck condition after laminectomy surgery. No medical need to transfer care back to [REDACTED].