

Case Number:	CM14-0044259		
Date Assigned:	06/20/2014	Date of Injury:	04/15/2013
Decision Date:	07/24/2014	UR Denial Date:	03/13/2014
Priority:	Standard	Application Received:	03/18/2014

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 Physical Medicine & Rehabilitation and is licensed to practice in Nevada. 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 injured worker is a 56 year-old female injured on April 15, 2013. The mechanism of injury is noted as a trip and fall. The most recent progress note, dated May 19, 2014, indicates that there are ongoing complaints of back pain. The physical examination demonstrated a 5'2", 168 pound individual. Diagnostic imaging studies reportedly noted a disc herniation. Previous treatment includes epidural steroid injections, narcotic medications, chiropractic care and other conservative measures. A request had been made for an orthopedic consultation and was not certified in the pre-authorization process on March 13, 2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Referral for Orthopedic Appointment: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Practice Guidelines, Independent Medical Examinations and Consultations, page 127.

Decision rationale: As noted in the most recent progress note, an orthopedic consultation assessment has been completed. As such, specific recommendations are made after this consultation. There does not appear to be any specific uncertainty or complex issues that are

required for additional consultation. Therefore, based on the medical records presented for review, there is no medical necessity for such a consultation.