

Case Number:	CM14-0070591		
Date Assigned:	07/14/2014	Date of Injury:	12/15/2008
Decision Date:	09/15/2014	UR Denial Date:	05/01/2014
Priority:	Standard	Application Received:	05/15/2014

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 and Rehabilitation 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 injured worker is a 47-year-old female who reported injury on 12/15/2008. The mechanism of injury was not provided. The diagnostic studies, prior surgical history, prior treatments, and medications were not provided. The diagnosis was noted to be lumbar disc displacement. There was no division of workers' compensation (DWC) form request for authorization (RFA) or primary treating physician report (PR2) submitted for review.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI low back: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 305-307.

Decision rationale: The ACOEM Guidelines indicate that unequivocal objective findings that identify specific nerve compromise on the neurologic examination are sufficient to warrant imaging in injured workers who do not respond to treatment and who would consider surgery an option. There was no DWC form RFA or PR2 submitted for the request. As such, there was a lack of documentation of objective physical examination findings, a lack of documentation

indicating the injured worker had a failure to respond to treatment, and a lack of documentation indicating the injured worker would consider surgery an option. Given the above, the request for MRI low back is not medically necessary.