

<b>Case Number:</b>	CM14-0188797		
<b>Date Assigned:</b>	11/19/2014	<b>Date of Injury:</b>	04/28/2014
<b>Decision Date:</b>	01/07/2015	<b>UR Denial Date:</b>	10/09/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/12/2014

### 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, has a subspecialty in Pain 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 injured worker had an original date of injury of April 28, 2014. The industrial diagnoses include chronic low back pain, lumbar sprain and strain, and headache. The disputed issue is a request for a neuromuscular consultation and treatment. There is a second disputed issue of orthopedic follow-up consultation. Both of these consultations were denied in a utilization review determination on October 9, 2014. P stated rationale for the denial of the neuromuscular consultation was that there was "limited evidence for long-term pain relief from the treatment." The utilization reviewer had reference the massage guidelines of the CA MTUS. With regard to the orthopedic consultation, this was denied on the grounds that "prior treatment recommendations from prior orthopedic visits are not outlined."

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Neuromuscular treatment consult:** Upheld

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

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) Occupational Medicine Practice Guidelines, Independent Medical Examinations and Consultations Chapter, Page 127

**Decision rationale:** ACOEM Guidelines, Independent Medical Examinations and Consultations Chapter states the following: "The occupational health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial factors are present, or when the plan or course of care may benefit from additional expertise. An independent medical assessment also may be useful in avoiding potential conflict(s) of interest when analyzing causation or when prognosis, degree of impairment, or work capacity requires clarification. When a physician is responsible for performing an isolated assessment of an examinee's health or disability for an employer, business, or insurer, a limited examinee-physician relationship should be considered to exist. A referral may be for: Consultation: To aid in the diagnosis, prognosis, therapeutic management, determination of medical stability, and permanent residual loss and/or the examinee's fitness for return to work. A consultant is usually asked to act in an advisory capacity, but may sometimes take full responsibility for investigation and/or treatment of an examinee or patient." In the case of this request, there is no progress report I could find that further explicates the medical necessity or type of consult this is. A neuromuscular treatment consult can be interpreted a number of ways, and without further details as to the rationale for this, this request is not medically necessary.