

<b>Case Number:</b>	CM14-0189748		
<b>Date Assigned:</b>	11/20/2014	<b>Date of Injury:</b>	09/04/2012
<b>Decision Date:</b>	01/12/2015	<b>UR Denial Date:</b>	10/21/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/13/2014

### 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 is a represented [REDACTED] employee who has filed a claim for chronic low back pain reportedly associated with an industrial injury of September 4, 2012. Thus far, the applicant has been treated with the following: Analgesic medications; opioid therapy; transfer of care to and from various providers in various specialties; earlier lumbar fusion surgery; and extensive periods of time off of work. In a Utilization Review Report dated October 20, 2014, the claims administrator denied a request for a chest x-ray. The claims administrator contended that the attending provider was performing chest x-ray testing for screening/evaluation purposes. The claims administrator stated that its decision was based on an October 9, 2014 DFR and associated October 13, 2014 RFA form. The applicant's attorney subsequently appealed. In an October 1, 2014 psychological consultation, the applicant was placed off of work, on total temporary disability, from a mental health perspective. In a medical progress note dated December 25, 2014, the applicant received refills of Prilosec, Norco, naproxen, and quazepam and was again placed off of work, on total temporary disability. In an orthopedic consultation of July 14, 2014, it was stated that the applicant was receiving "total permanent disability" benefits through the Workers' Compensation system status post earlier failed lumbar spine surgery. The applicant was using Norco and marijuana, it was noted on this date. The remainder of the file was surveyed on several occasions. It did not appear that either the October 9, 2014 DFR or the October 13, 2014 RFA form on which the article in question, the chest x-ray, was sought or seemingly incorporated into the Independent Medical Review packet.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Chest X-Ray:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Pulmonary Chapter

**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 Parameter for the Performance of Chest Radiography

**Decision rationale:** The MTUS does not address the topic. While the American College of Radiology notes that indications for chest x-ray imaging include the evaluation of respiratory, cardiovascular, and/or upper GI symptoms, evaluation of extrathoracic and/or thoracic neoplasms, follow-up of known thoracic disease, monitoring of applicants on life support devices, and/or to comply with government regulations, such as screening of applicants with active tuberculosis or occupational lung diseases such as silicosis, in this case, however, it was not clearly stated what was sought. It was not clearly stated what was suspected. No clear rationale for pursuit of a chest x-ray test in question was proffered, although it is acknowledged that the October 9, 2014 DFR form and/or associated October 13, 2014 RFA form on which the article in question was sought were not seemingly incorporated into the Independent Medical Review packet. The information which is on file, however, failed to support or substantiate the request. Therefore, the request is not medically necessary.