

<b>Case Number:</b>	CM14-0191993		
<b>Date Assigned:</b>	11/25/2014	<b>Date of Injury:</b>	06/06/2011
<b>Decision Date:</b>	01/12/2015	<b>UR Denial Date:</b>	10/17/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/17/2014

### 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 Family Practice 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:

51 year old male claimant sustained a work injury on 6/6/11 involving the low back. He was diagnosed with lumbar disc disease. He had undergone physical therapy of the lumbar spine and had obtained benefit. An x-ray of the lumbar spine on 7/24/14 indicated the claimant had degenerative changes. A progress note on 9/23/14 indicated the claimant had 3-4/10 back pain. Exam findings were notable reduced range of motion, and paraspinal tenderness. The physician requested 6 additional sessions of physical therapy and an magnetic resonance imaging (MRI) of the lumbar spine. The claimant had completed over 12 sessions of therapy since April 2014.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**MRI OF THE LUMBAR SPINE WITH AND WITHOUT CONTRAST:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG, MRI

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 309.

**Decision rationale:** According to the ACOEM guidelines, a magnetic resonance imaging (MRI) of the lumbar spine is recommended for red flag symptoms such as cauda equine, tumor, infection, or uncertain neurological diagnoses not determined or equivocal on physical exam.

The claimant did not have the above findings. A x-ray in July 2014 explains some of the claimant's symptoms and did not indicate the need for an MRI. The MRI of the lumbar spine is not medically necessary.

**6 ADDITIONAL SESSIONS OF PHYSICAL THERAPY FOR THE LUMBAR SPINE:**

Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 299, Chronic Pain Treatment Guidelines physical medicine Page(s): 98-99.

**Decision rationale:** According to the California MTUS guidelines, therapy is recommended in a fading frequency. They allow for fading of treatment frequency (from up to 3 visits per week to 1 or less), plus active self-directed home Physical Medicine. The following diagnoses have their associated recommendation for number of visits. Myalgia and myositis, unspecified 9-10 visits over 8 weeks Neuralgia, neuritis, and radiculitis, unspecified 8-10 visits over 4 weeks. According to the American College of Occupational and Environmental Medicine (ACOEM) guidelines: "Physical and Therapeutic Interventions are recommended for 1 to 2 visits for education." This education is to be utilized for at home exercises which include stretching, relaxation, strengthening exercises, etc. In this case, the claimant has already undergone at least 12 sessions of physical therapy. There is no documentation to indicate that the sessions provided cannot be done independently by the claimant at home. Consequently, additional therapy sessions are not medically necessary.