

Case Number:	CM14-0193717		
Date Assigned:	12/01/2014	Date of Injury:	12/09/2013
Decision Date:	01/13/2015	UR Denial Date:	10/21/2014
Priority:	Standard	Application Received:	11/19/2014

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:

Claimant is a 41 year old male who sustained a work injury on 12/19/13 involving the low back. He was diagnosed with lumbar strain and left sided radiculopathy. He had undergone physical therapy and used oral analgesics. A progress note on 9/17/14 indicated the claimant had 4-8/10 back pain. Exam findings were notable for reduced range of motion of the lumbar spine. There were no neurological findings. The following month a lumbar brace was requested.

IMR ISSUES, DECISIONS AND RATIONALES

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

Lumbosacral brace: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 301.

Decision rationale: According to the guidelines, lumbar supports are not shown to provide lasting benefit. The length of use of a back brace was not specified in this case. The request for a back brace is not medically necessary.