

Case Number:	CM14-0194112		
Date Assigned:	12/01/2014	Date of Injury:	10/02/2013
Decision Date:	01/16/2015	UR Denial Date:	11/17/2014
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 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 October 2, 2013. In a Utilization Review Report dated November 17, 2014, the claims administrator denied a request for six sessions of chiropractic manipulative therapy for the back. The claims administrator stated that the applicant was apparently concurrently receiving acupuncture. The claims administrator's rationale was extremely difficult to follow but seemingly predicated on a lack of documentation as to whether the applicant had or had not had prior manipulative treatment. The claims administrator stated that it was basing its decision on an RFA form and progress note of November 6, 2014. The applicant's attorney subsequently appealed. In a progress note dated May 14, 2014, the applicant reported persistent complaints of neck pain, low back pain, and headaches. The applicant remained off of work, the treating provider acknowledged. The applicant received previously authorized trigger point injections and was asked to continue Vicodin, Soma, Flexeril, Naprosyn, and a topical compounded medication. The applicant had had 23 sessions of physical therapy, six sessions of acupuncture, and two prior sets of trigger point injections, it was acknowledged. On May 28, 2014, the applicant was again placed off of work, it was stated in one section of the note. In another section of the note, it was stated that the applicant was returned to work with the limitation of taking a 15-minute break every two hours. It was not clearly stated whether the applicant's employer was able to accommodate said limitation. Vicodin, Soma, Flexeril, Naprosyn, and a topical compounded agent were endorsed. The applicant was asked to start chiropractic manipulative therapy on this date. The applicant did seemingly receive chiropractic manipulative treatment through handwritten progress notes of June 5, 2014, June 9, 2014, June 12, 2014, and June 17, 2014, it was suggested. On November 6, 2014, the applicant's primary treating provider

suggested that the applicant was working with restrictions despite ongoing complaints of headaches, neck pain, and low back pain. Limited range of motion about the cervical spine was appreciated. Palpable tender points were noted. The attending provider stated that the applicant had had 23 sessions of physical therapy, 12 sessions of acupuncture, six sessions of manipulative therapy, and multiple sets of trigger point injections. Additional chiropractic manipulative therapy was sought while the applicant was asked to continue Vicodin, Naprosyn, and Flexeril. It was suggested that the applicant was working with a limitation of taking a 15-minute break every hour. In a permanent and stationary report dated August 27, 2014, the attending provider noted that the applicant had ongoing complaints of headaches, neck pain, and low back pain. The applicant was given permanent limitations of taking a 15-minute break every two hours of continuous work. The attending provider did not clearly state whether the applicant was or was not working. In an earlier July 30, 2014 progress note, the attending provider stated that the applicant was working with the limitation of taking a 15-minute break every two hours.

IMR ISSUES, DECISIONS AND RATIONALES

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

6 visits of Chiropractic care to the lower back: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines manual therapy & manipulation.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Manual Therapy and Manipulation topic Page(s): 59-60.

Decision rationale: As noted on pages 59 and 60 of the MTUS Chronic Pain Medical Treatment Guidelines, up to 24 sessions of chiropractic manipulative therapy are recommended in applicants who demonstrate treatment success by achieving and/or maintaining successful return to work status. Here, the bulk of the progress notes on file suggest that the applicant has, in fact, achieved and/or maintained successful return to work status. The applicant is apparently working with limitations in place, it was suggested on several occasions, referenced above. Continued chiropractic manipulative therapy, thus, was/is indicated on and around the date in question. Therefore, the request was/is medically necessary.