

Case Number:	CM15-0102041		
Date Assigned:	06/04/2015	Date of Injury:	02/01/2013
Decision Date:	07/03/2015	UR Denial Date:	04/27/2015
Priority:	Standard	Application Received:	05/27/2015

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:
 State(s) of Licensure: Arizona, California
 Certification(s)/Specialty: Family Practice

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This 53 year old female sustained an industrial injury on 2/1/13. She subsequently reported right arm pain. Diagnoses include status post right shoulder surgery and status post lumbar spine fusion. Treatments to date include x-ray and MRI testing, back and shoulder surgery, physical therapy, chiropractic care, acupuncture and prescription pain medications. The injured worker continues to experience neck pain that radiates to the right shoulder. Upon examination, there was decreased range of motion of the cervical spine and right shoulder. There is tenderness along the supraspinatus tendon grooves on the right shoulder and in the lateral epicondyle of the right elbow/ forearm. Impingement test is positive on the right shoulder. Muscle testing of cervical pain was normal and right shoulder was 4/ 5 in all planes. A request for Pain management consultation for the cervical spine was made by the treating physician.

IMR ISSUES, DECISIONS AND RATIONALES

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

Pain management consultation for the cervical spine: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Guidelines, Chapter 7, Independent Medical Examinations and Consultations, page 127.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG- pain guidelines and 92-93.

Decision rationale: According to the guidelines, office visits are recommended as medically necessary. The determination is also based on what medications the patient is taking, since some medicines such as opiates, or medicines such as certain antibiotics, require close monitoring. As patient conditions are extremely varied, a set number of office visits per condition cannot be reasonably established. The determination of necessity for an office visit requires individualized case review and assessment, being ever mindful that the best patient outcomes are achieved with eventual patient independence from the health care system through self care as soon as clinically feasible. A specialist referral may be made if the diagnosis is uncertain, extremely complex, when psychosocial factors are present, or when the plan or course of care may benefit from additional expertise. A consultation is used to aid in diagnosis, prognosis, therapeutic management, determination of medical stability, and permanent residual loss and/or examinees fitness for return to work. In this case, the claimant does have radicular symptoms with an MRI showing nerve root compression; however the intervention desired (ie injections, blocks, etc) was not specified. The uncertainty in diagnoses was not noted. The request for a pain management consultation is not justified and not medically necessary.