

Case Number:	CM15-0102232		
Date Assigned:	06/04/2015	Date of Injury:	04/12/1999
Decision Date:	07/17/2015	UR Denial Date:	05/21/2015
Priority:	Standard	Application Received:	05/28/2015

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:

The injured worker is a 65 year old male, who sustained an industrial injury on 4/12/1999. He reported neck and shoulder pain. Diagnoses have included bilateral shoulder impingement syndrome, chronic cervicgia, cervical degenerative disc disease and cervical radiculitis. Treatment to date has included shoulder surgery, home exercise program, cervical traction and medication. According to the progress report dated 4/30/2015, the injured worker complained of left shoulder pain rated 6/10. Exam of shoulders revealed positive impingement signs bilaterally. Exam of the cervical spine revealed tenderness to palpation. Spurling's maneuver was positive on the right. Range of motion in the cervical spine was moderately to severely reduced. It was noted that magnetic resonance imaging (MRI) of the cervical spine from 2/3/2015 showed degenerative changes throughout the cervical spine, not significantly progressed when compared to the prior exam of 3/14/2013. Authorization was requested for a neurosurgical consultation regarding the cervical spine.

IMR ISSUES, DECISIONS AND RATIONALES

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

One (1) neurological consultation regarding the cervical spine (neck): 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, page 127.

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

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 MRI of the cervical spine was stable and was consistent with degenerative changes. There was no mention for indication for surgery. Pain control and improving function can be obtained by non-surgical methods. The neurosurgical consultation is not medically necessary.