

Case Number:	CM15-0136195		
Date Assigned:	07/24/2015	Date of Injury:	10/11/2012
Decision Date:	08/25/2015	UR Denial Date:	07/06/2015
Priority:	Standard	Application Received:	07/14/2015

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: Texas, New York, California
 Certification(s)/Specialty: Preventive Medicine, Occupational Medicine

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 61-year-old who has filed a claim for chronic low back, neck, and knee pain with derivative complaints of headaches reportedly associated with an industrial injury of October 11, 2012. In a utilization review report dated July 6, 2015, the claims administrator failed to approve a request for CT imaging of the head. The claims administrator referenced an RFA form received on June 25, 2015 and an associated progress note of June 12, 2015 in its determination. The progress note was referred to as June 12, 2015 in some sections of the UR report and as June 2, 2015 in other sections of the UR report. The applicant's attorney subsequently appealed. On May 1, 2015, the applicant was placed off work, on total temporary disability, for an additional eight weeks. The applicant had not worked since the date of injury, it was reported. Multifocal complaints of neck pain, low back pain, knee pain, and headaches were reported. The applicant was asked to pursue a CT scan of the head to evaluate increased intensity headaches. An ENT consultation was also sought to evaluate allegations of tinnitus. Norco, Naprosyn, Soma, and methadone were renewed while the applicant was kept off work, on total temporary disability.

IMR ISSUES, DECISIONS AND RATIONALES

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

CT Scan - Head: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Cerebral MRI.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Head, CT (computed tomography).

Decision rationale: No, the request for CT imaging of the head was not medically necessary, medically appropriate, or indicated here. The MTUS does not address the topic. However, ODG's Head Chapter, CT Imaging Topic notes that CT imaging is not recommended in the evaluation of headaches or post concussive syndrome beyond the emergency phase of 72 hours post-injury, except if the condition deteriorates or red flags are noted. ODG notes that inappropriate examinations often include head CTs for chronic headaches. ODG further notes that MRI scans are generally recommended as opposed to CT once the initial phase of injury has passed. Here, the applicant was several years removed from the date of injury as of the date of the request, May 1, 2015. The applicant had chronic headaches present on that date. CT imaging was not indicated in the evaluation of the applicant's chronic headaches, per ODG. The attending provider failed to furnish a clear or compelling rationale for selection of this particular imaging study in the face for the ODG position against CT imaging of the head outside of the emergency or acute phase of an injury. Therefore, the request was not medically necessary.