

Case Number:	CM15-0198484		
Date Assigned:	10/13/2015	Date of Injury:	02/04/2014
Decision Date:	12/02/2015	UR Denial Date:	09/08/2015
Priority:	Standard	Application Received:	10/08/2015

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 51-year-old who has filed a claim for chronic low back and shoulder pain reportedly associated with an industrial injury of February 4, 2014. In a Utilization Review report dated September 8, 2015, the claims administrator failed to approve a request for MRI imaging of the head. The claims administrator referenced an August 18, 2015 office visit in its determination. The applicant's attorney subsequently appealed. On August 18, 2015, the applicant was placed off of work, on total temporary disability, for six weeks. Extracorporeal shockwave therapy, a pain management consultation, a neurology consultation, a urology consultation, an orthopedic consultation, EMG testing of the upper extremities, physical therapy, and manipulative therapy were being sought. The note was thinly and sparsely developed, difficult to follow, and not altogether legible. The note compromised, in large part, of preprinted checkboxes. The attending provider stated that he wished the applicant to undergo a head MRI, apparently on the request of another provider. Little to no mention of issues with headaches was reported, however. The applicant's primary pain complaint was seemingly the lumbar spine, it was suggested.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI of the 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 (ODG).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Radiology Amended 2014 (Resolution 39).

Decision rationale: No, the request for MRI imaging of the head was not medically necessary, medically appropriate, or indicated here. The MTUS does not address the topic. While the American College of Radiology (ACR) notes that indications for MRI imaging of the brain (head) includes suspected neoplastic conditions, vascular issues, ischemia, infarction, suspected arteriovenous malformations, congenital disorders, metabolic disorders, trauma, hemorrhage, epilepsy, suspected psychiatric disorders, planning prior to interventional procedures or surgical procedures, etc., here, however, it was not clearly stated what was sought. It was not clearly stated what was suspected. Little-to-no narrative commentary accompanied the August 18, 2015 office visit on which the article in question was proposed. Rather, the treating provider simply stated that he was ordering MRI imaging of the head on the grounds that this had been proposed by another one of the applicant's treating providers. A clear differential diagnosis was not, however, furnished. The extent of the applicant's head issues and/or headaches was not clearly described or characterized on the handwritten August 18, 2015 office visit, which compromised, in large part, of preprinted checkboxes. The information on file, in short, failed to support or substantiate the request. Therefore, the request was not medically necessary.