

Case Number:	CM15-0199232		
Date Assigned:	10/14/2015	Date of Injury:	08/03/2013
Decision Date:	12/01/2015	UR Denial Date:	10/05/2015
Priority:	Standard	Application Received:	10/09/2015

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: California

Certification(s)/Specialty: Chiropractor

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 39 year old male, who sustained an industrial injury on 8-03-2013. The injured worker is being treated for cervical sprain-strain, lumbar sprain-strain and radiculopathy. Treatment to date has included diagnostics, epidural injection, physical therapy and medications. Per the Primary Treating Physician's Progress Report dated 1-12-2015, the injured worker reported pain slightly decreased due to current treatment. Objective findings included motion restriction by 15-20 degrees of the cervical and lumbar spine with motor loss of upper and lower extremities and spasm. Per the medical records dated 1-12-2015 to 6-17-2015 there is no documentation of subjective or objective improvement in symptoms, increase in activities of daily living or decrease in pain level attributed to any prior chiropractic therapy. Although chiropractic therapy is referred to in the treatment plans in the above date range, it is unclear from the medical records how many, if any, sessions of prior chiropractic therapy the IW was received. As of 1-12-2015, The IW was to remain off of work until 2-02-2015 and the plan of care included chiropractic therapy, 1-2 times per week for 6 weeks. As of the record dated 6-17-2015, the IW was still to remain off work and the treatment plan was the same: chiropractic therapy, 1-2 times per week for 6 weeks. On 8-07-2015, the treatment plan included 16 visits of chiropractic therapy (2x8). Authorization was requested on 1-12-2015 and again on 6-17-2015 for 24 visits of chiropractic therapy (2x12) for the cervical and lumbar spines. On 10-02-2015, Utilization Review non-certified the request for 24 visits of chiropractic therapy (2x12) for the cervical and lumbar spines.

IMR ISSUES, DECISIONS AND RATIONALES

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

Chiropractic with associated therapy 2 times per week for 12 weeks to cervical and lumbar spine: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Manual therapy & manipulation.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Manual therapy & manipulation.

Decision rationale: The claimant presented with chronic neck and low back pain. Previous treatments include medications, injections, physical therapy, and chiropractic. According to the available medical records, the claimant has been receiving chiropractic treatment 2-3 times a month since 01/12/2015. Although evidences based MTUS guidelines might recommend up to 18 chiropractic visits for low back pain, ongoing maintenance care is not recommended. In this case, there is no document of functional improvement, and the claimant has had ongoing chiropractic treatments. Therefore, the request for 24 chiropractic visits is not medically necessary.