

<b>Case Number:</b>	CM15-0202635		
<b>Date Assigned:</b>	10/19/2015	<b>Date of Injury:</b>	09/16/2010
<b>Decision Date:</b>	12/04/2015	<b>UR Denial Date:</b>	10/02/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/14/2015

### 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 [REDACTED] beneficiary who has filed a claim for chronic low back pain (LBP) reportedly associated with an industrial injury of September 16, 2010. In a Utilization Review report dated October 2, 2015, the claims administrator failed to approve a request for a repeat MRI imaging of the lumbar spine. The claims administrator referenced an office visit and an associated RFA form dated September 16, 2015 in its determination. The applicant's attorney subsequently appealed. On August 19, 2015, the applicant reported ongoing issues with low back pain radiating to the lower extremities. The applicant was noted to have herniated lumbar intervertebral disks with associated spinal stenosis. The applicant had undergone multiple epidural steroid injections, it was reported. The applicant was reportedly working with restrictions in place, the treating provider suggested. Permanent work restrictions were renewed. The attending provider stated that the applicant's previous lumbar MRI was outdated from an interventional standpoint and suggested that the applicant was considering further "interventional treatment." Prilosec, Ultracet, and Neurontin were endorsed while the applicant was seemingly returned to work. The requesting provider was an orthopedic spine surgeon, it was suggested. On September 16, 2015, the attending provider again stated that the applicant was awaiting authorization for lumbar MRI imaging. The attending provider reiterated the request for lumbar MRI imaging. The attending provider stated in one section of the note that the applicant wished to avoid surgery, while another section stated that the applicant was considering interventional treatment.

## IMR ISSUES, DECISIONS AND RATIONALES

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

**Repeat MRI of the lumbar spine:** Overturned

**Claims Administrator guideline:** Decision based on MTUS Low Back Complaints 2004, Section(s): Diagnostic Criteria, Special Studies. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back - Lumbar & Thoracic (Acute & Chronic) Chapter: MRI's (magnetic resonance imaging).

**MAXIMUS guideline:** Decision based on MTUS Low Back Complaints 2004, Section(s): Surgical Considerations.

**Decision rationale:** Yes, the request for repeat MRI imaging of the lumbar spine was medically necessary, medically appropriate, and indicated here. The operating diagnosis here was that of spinal stenosis, the treating provider reported on September 16, 2015 office visit at issue. The MTUS Guideline in ACOEM Chapter 12, page 307 notes that the treatment for spinal stenosis is usually a complete laminectomy. The attending provider suggested (but did not clearly state) on September 16, 2015 that the applicant was in fact considering spine surgery for spinal stenosis and also stated that the previously performed lumbar MRI imaging was too dated for preoperative planning purposes. The requesting provider was a spine surgeon, it was further noted. Moving forward with the lumbar MRI study in question was seemingly indicated for what was characterized as preoperative planning purposes and/or as a precursor to pursuit of possible spine surgery. Therefore, the request is medically necessary.