

Case Number:	CM15-0207273		
Date Assigned:	10/26/2015	Date of Injury:	07/03/2014
Decision Date:	12/09/2015	UR Denial Date:	09/25/2015
Priority:	Standard	Application Received:	10/21/2015

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: Emergency 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 injured worker is a 44 year old male who sustained an industrial injury on 07-03-2014. According to an agreed medical evaluation dated 06-16-2015, the injured worker had experienced headaches since his injury. Headaches were located over the scalp and included throbbing headaches on the right side and tension headaches. He also reported difficulty with memory and concentration, blurred vision of the right eye, hearing loss and tinnitus of the right ear, wooziness and lightheadedness without vertigo. He also reported anxiety and depression. The provider's opinion was that the injured worker had reached Maximum Medical Improvement and that the injured worker would benefit from Fioricet for tension headaches and Maxalt for any breakthrough migraine headaches. On 09-16-2015, subjective complaints included lumbar spine, cervical spine and thoracic spine and shoulder pain. The injured worker was feeling the same. Objective findings were noted as no change. Diagnoses included cervical pain, lumbar sprain, shoulder pain and thoracic pain. The treatment plan included consult evaluation with neurologist for headaches, ortho evaluation, pain management evaluation and consult evaluation for psych. Follow up was indicated in 6 weeks. Work status was noted as temporarily totally disabled. On 09-25-2015, Utilization Review non-certified the request for neurologist consultation and authorized the request for pain management consult, ortho consultation and psych consultation.

IMR ISSUES, DECISIONS AND RATIONALES

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

Neurologist consultation: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM (American Independent Medical Examinations and Consultations, 2nd Edition, Chapter 7 (pp 127)).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Introduction.

Decision rationale: The requested Neurologist consultation is not medically necessary. California Medical Treatment Utilization Schedule (MTUS), 2009, Chronic pain, page 1, Part 1: Introduction, states "If the complaint persists, the physician needs to reconsider the diagnosis and decide whether a specialist evaluation is necessary." The injured worker has subjective complaints included lumbar spine, cervical spine and thoracic spine and shoulder pain. The injured worker was feeling the same. Objective findings were noted as no change. The treating physician has not documented positive neurologic exam findings. The treating physician did not adequately document the medical necessity for this consult or how the treating physician is anticipating this consult will affect treatment. The criteria noted above not having been met, Neurologist consultation is not medically necessary.