

Case Number:	CM15-0208099		
Date Assigned:	10/27/2015	Date of Injury:	03/12/1993
Decision Date:	12/14/2015	UR Denial Date:	10/05/2015
Priority:	Standard	Application Received:	10/22/2015

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 50 year old male, who sustained an industrial injury on 03-12-1993. He has reported injury to the low back. The diagnoses have included lumbalgia; sciatica; and lumbar segmental dysfunction of somatic dysfunction. Treatment to date has included medications, diagnostics, chiropractic therapy, and home exercise program. Medications have included Tylenol. A progress report from the treating provider, dated 09-25-2015, documented an evaluation with the injured worker. The injured worker reported constant, severe, stabbing, and burning low back pain; hip pain; bilateral lower extremities numbness and tingling and burning in the feet; his flare up was on 09-21-2015 while bending over the sink to brush his teeth; he was unable to work; the pain increases at night and with standing, going from sitting to standing, sleeping position, bending, twisting, getting dressed, lifting, and pulling; right leg and calf numbness and tingling and left thigh numbness and tingling; and he is currently taking Tylenol. Objective findings included restricted and painful lumbar range of motion in all ranges; pain and spasm upon palpation at L2-5, S1; and straight leg raising, Soto-Hall, and Kemp's cause low back pain. The treatment plan has included the request for 8 chiropractic visits to include re- exam, chiropractic manipulation 3-4, spinal traction, ultrasound, and EMS (electric muscle stimulation). The original utilization review, dated 09-24-2015, modified the request for 8 chiropractic visits to include re-exam, chiropractic manipulation 3-4, spinal traction, ultrasound, and EMS, to 2 chiropractic sessions with manipulation 3-4 and one re-examination.

IMR ISSUES, DECISIONS AND RATIONALES

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

8 chiropractic visits to include re-exam, chiropractic manipulation 3-4, spinal traction, ultrasound, and EMS: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Manual therapy & manipulation, Ultrasound, therapeutic. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back - Lumbar & Thoracic (Acute & Chronic), Traction.

MAXIMUS guideline: Decision based on MTUS Low Back Complaints 2004, Section(s): General Approach, Initial Care, and Chronic Pain Medical Treatment 2009, Section(s): Manual therapy & manipulation, Ultrasound, therapeutic.

Decision rationale: The claimant presented with flare-up of chronic low back pain. Previous treatments include medications, chiropractic, and home exercises. Although evidences based MTUS guidelines might recommend 1-2 chiropractic visits every 4-6 months for flare-ups, traction and ultrasound treatments are not recommended. The request for 8 visits also exceeded MTUS guidelines recommendation, therefore, it is not medically necessary.