

<b>Case Number:</b>	CM15-0027823		
<b>Date Assigned:</b>	02/18/2015	<b>Date of Injury:</b>	06/10/2009
<b>Decision Date:</b>	04/07/2015	<b>UR Denial Date:</b>	02/05/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	02/13/2015

### 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, Hawaii  
 Certification(s)/Specialty: Physical Medicine & Rehabilitation

### CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This 65-year-old male reported a work-related injury on 06/10/2009. According to the PR2 dated 12/8/14, the injured worker (IW) reports pain in the neck and low back. Diagnoses include herniated disc of the lumbar spine with moderate to severe stenosis, bilateral L5 spondylosis, lumbar radiculopathy, thoracic sprain/strain, bilateral shoulder rotator cuff tear, bilateral shoulder impingement and bursitis, S1 radiculopathy and right sacroiliitis. Previous treatments include medications, physical therapy, chiropractic treatment, acupuncture, surgery and occipital nerve blocks. The treating provider requests neurology follow up office visits. The Utilization Review on 2/5/2015 non-certified the request for neurology follow up office visits, citing CA MTUS and ODG recommendations.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Neurology Follow up office visits:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Practice Guidelines, 2nd Ed page 127 and on ODG Neck & Upper Back (web: updated 11/18/14).

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) page 127.

**Decision rationale:** The patient presents with pain affecting the neck and low back. The current request is for Neurology Follow up office visits. The treating physician report dated 12/18/14 (9B) states, 'Neurology follow ups with [REDACTED].' The report goes on to state, "He states that he received an occipital nerve block for his headaches from his neurologist which helped decrease his headaches but the effects of the injection has worn off and he is experiencing increasing headaches. He says he no longer has neurology follow ups with [REDACTED]." ACOEM Practice Guidelines, 2nd Edition (2004), page 127 has the following: "The occupational health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial factors are present, or when the plan or course of care may benefit from additional expertise." ACOEM guidelines further states, referral to a specialist is recommended to aid in complex issues. Medical reports provided show the patient is experiencing increasing headaches. In this case, the patient presents with severe headaches and the treating physician is requesting a follow up with a neurologist. While the current request does seem medically necessary, it does not specify the quantity of follow up visits to be received by the patient and an open ended request is not supported. Recommendation is for denial.