

Case Number:	CM15-0032835		
Date Assigned:	02/26/2015	Date of Injury:	12/30/2013
Decision Date:	04/07/2015	UR Denial Date:	02/06/2015
Priority:	Standard	Application Received:	02/23/2015

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, Oriental 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 22 year old male, who sustained an industrial injury on 12/30/2013. He reports left groin and low back pain after lifting a heavy object. Diagnoses include lumbosacral neuritis/radiculitis, lumbar sprain/strain, myofascial pain, thoracic sprain/strain, sacro-iliac sprain/strain and left inguinal hernia repair. Treatments to date include chiropractic care, TENS (transcutaneous electrical nerve stimulation), home exercise program, physical therapy, aquatic therapy and medication management. A progress note from the treating provider dated 1/29/2015 indicates the injured worker reported low back pain. Low back pain is improving with physical therapy and he is working modified duty. Per a PR-2 dated 9/2/2014, the claimant is worse with cold weather and activity. Chiropractic is beneficial in decreasing pain, increasing ROM and relaxing muscles. Per a chiropractic evaluation dated 7/1/14, the claimant has increased range of motion, increased muscle strength, increased lifting capacity, increased sit/stand/walk capacity, and decreased radiculopathy from six sessions of chiropractic. He is not working. Per a progress summary dated 8/1/2014, the claimant has had improvement from six sessions of chiropractic. The claimant had increase of range of motion in flexion (42 to 52), extension (18 to 22), left lateral flexion (16 to 20), and right lateral flexion (18 to 22). Left lower extremity muscle strength increased form 4+ to 5+ in the L5 and S1 myotome. He has shown an 100-200% increase in ability to sit stand walk and 200% increase in lifting capacity. The claimant had at least 15 sessions of chiropractic between 7/21/14 to 9/8/14.

IMR ISSUES, DECISIONS AND RATIONALES

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

Chiropractic treatment 2 times a week for 3 weeks: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines chiropractic manipulative treatment Page(s): 58, 59.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Manual Therapy and Manipulation Page(s): 58-60.

Decision rationale: According to evidenced based guidelines, further chiropractic after an initial trial is medically necessary based on functional improvement. Functional improvement is defined as a clinically significant improvement in activities of daily living, a reduction in work restrictions, or a reduction of dependency on continued medical treatments or medications. With functional improvement, up to 18 visits over 6-8 weeks may be medically necessary. If there is a return to work, then 1-2 visits every 4-6 months may be necessary. The claimant has had measurable functional improvement in range of motion, activities of daily living, and has returned to modified duty from chiropractic therapy. Therefore, six additional visits of chiropractic are medically necessary.