

Case Number:	CM15-0037920		
Date Assigned:	03/06/2015	Date of Injury:	11/18/2009
Decision Date:	04/16/2015	UR Denial Date:	02/18/2015
Priority:	Standard	Application Received:	02/27/2015

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 46-year-old who has filed a claim for chronic low back pain reportedly associated with an industrial injury of November 18, 2009. In a Utilization Review Report dated February 17, 2015, the claims administrator failed to approve a request for lumbar MRI imaging. A January 30, 2013 progress note was referenced in the determination. The claims administrator acknowledged that the applicant had a history of prior lumbar spine surgery. The applicant's attorney subsequently appealed. On March 5, 2015, the applicant reported persistent complaints of low back pain. The applicant did not have focal motor or sensory deficits about the lower extremities. The applicant was not working, it was acknowledged. MRI imaging of the lumbar spine was sought. The attending provider stated that MRI imaging of the cervical and/or lumbar spines could also be considered at a later point in time. Permanent work restrictions were renewed. The attending provider did not state how (or if) the proposed lumbar MRI would influence or alter the treatment plan. On January 30, 2015, the attending provider again noted that the applicant had ongoing complaints of chronic low back pain with radiation of pain to the legs, 7/10. The applicant was status post earlier lumbar spine surgery, it was acknowledged. No motor or sensory weakness was appreciated. The attending provider reiterated his request for a lumbar MRI imaging. In a February 23, 2015 appeal letter, the attending provider stated that he intended obtaining lumbar MRI imaging owing to the fact that the applicant had not had MRI imaging since 2011.

IMR ISSUES, DECISIONS AND RATIONALES

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

Repeat Lumbar MRI with and without contrast: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG).

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 309; 304.

Decision rationale: No, the request for lumbar MRI imaging was not medically necessary, medically appropriate, or indicated here. While the MTUS Guideline in ACOEM Chapter 12, Table 12-8, page 309 does acknowledge that MRI imaging is recommended as a test of choice in applicants who have had prior back surgery, this recommendation is, however, qualified by commentary made in ACOEM Chapter 12, page 304 to the effect that imaging studies should be reserved for cases in which surgery is being considered or red-flag diagnoses are being evaluated. Here, however, multiple progress notes, referenced above, interspersed throughout early 2015 contained no references that the applicant is actively considering or contemplating any kind of surgical intervention involving the lumbar spine based on the outcome of the study in question. The attending provider seemingly suggested that MRI imaging of the lumbar spine was being sought for academic or evaluation purposes, with no clearly formed intention of acting on the results of the same. Therefore, the request was not medically necessary.