MAXIMUS Federal Services

Case Number:	CM15-0054265		
Date Assigned:	03/27/2015	Date of Injury:	11/04/2013
Decision Date:	05/01/2015	UR Denial Date:	02/24/2015
Priority:	Standard	Application Received:	03/23/2015

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: 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 injured worker is a 59 year old, female who sustained a work related injury on 11/4/13. The diagnoses have included post-concussive syndrome, vertigo and headaches. Treatments have included a CT scan of the brain on 12/6/13, medications and a previous MRI of the brain. In the SOAP Note dated 8/4/14, the injured worker complains of chronic daily headaches. The treatment plan noted in this visit note is that the MRI of brain should be repeated in February, 2015 with MS protocol.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI of the brain with multiple sclerosis protocol: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Head Chapter, MRI (magnetic resonance imaging).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Head (trauma, headaches, etc., not including stress & mental disorders), MRI (magnetic resonance imaging).

Decision rationale: The Official Disability Guidelines state that indications for magnetic resonance imaging of the brain are: 1) To determine neurological deficits not explained by CT, 2) To evaluate prolonged interval of disturbed consciousness, and 3) To define evidence of acute changes super-imposed on previous trauma or disease. The patient may be a candidate for a repeat MRI, but there is no explanation in the medical record for "multiple sclerosis protocol". In addition, it is unlikely that multiple sclerosis, if detected, is a work-related condition. MRI of the brain with multiple sclerosis protocol is not medically necessary.