

Case Number:	CM15-0054417		
Date Assigned:	03/27/2015	Date of Injury:	07/20/2010
Decision Date:	05/01/2015	UR Denial Date:	03/13/2015
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: 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 [REDACTED] beneficiary who has filed a claim for chronic low back pain reportedly associated with an industrial injury of July 20, 2010. In a Utilization Review report dated March 13, 2015, the claims administrator failed to approve a request for lumbar MRI imaging. A progress note and associated RFA form of January 13, 2015 were referenced in the determination. The applicant's attorney subsequently appealed. In a questionnaire dated February 24, 2015, the applicant acknowledged that he was not working owing to ongoing complaints of neck, back, arm, and leg pain. The applicant had last worked in 2010, it was acknowledged. In a February 24, 2015 progress note, the applicant reported ongoing complaints of neck pain, 4-6/10, with rare paresthesias about the arms. Persistent complaints of low back pain radiating into bilateral legs, highly variable, 5-10/10 were reported. The attending provider also acknowledged that the applicant last worked in 2010. The attending provider referenced a lumbar MRI of April 13, 2013 notable for a broad-based disk protrusion at L5-S1 generating thecal sac impingement and left greater than right neuroforaminal stenosis. Cervical MRI imaging of May 20, 2011 was also referenced, notable for focal protrusions at C4-C5 and C5-C6. Hyposensorium was noted about the right leg on exam with 5- to 5/5 right lower extremity strength versus 5/5 left lower extremity strength throughout. Updated lumbar MRI imaging was endorsed, along with a topical compounded medication. It was not clearly stated how the proposed lumbar MRI would influence the treatment plan, however.

IMR ISSUES, DECISIONS AND RATIONALES

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

(Updated) MRI (magnetic resonance imaging) of the lumbar spine: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 287, 304.

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

Decision rationale: No, the request for a lumbar MRI was not medically necessary, medically appropriate, or indicated here. As noted in the MTUS Guideline in ACOEM Chapter 12, page 304, imaging studies should be reserved for cases in which surgery is being considered or red-flag diagnoses are being evaluated. Here, however, the February 24, 2015 progress note on which the lumbar MRI in question was endorsed made no mention of the applicant's willingness to consider or contemplate any kind of surgical intervention based on the outcome of the study. Rather, it appeared that the attending provider was intent on pursuing lumbar MRI 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.