

Case Number:	CM15-0081626		
Date Assigned:	05/04/2015	Date of Injury:	09/29/2009
Decision Date:	07/07/2015	UR Denial Date:	04/21/2015
Priority:	Standard	Application Received:	04/28/2015

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: 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:

The 38-year-old male injured worker suffered an industrial injury on 09/29/2009. The diagnoses included degenerations of the lumbosacral intervertebral disc, lumbar post-laminectomy syndrome, chronic pain syndrome, lumbosacral radiculopathy and osteopenia. The injured worker had been treated with medications. On 4/21/2015, the treating provider reported the low back pain rated at 5/10 with the worst 7/10 along with lower extremity weakness, stiffness, radiation to both lower extremities, and spasms. The injured worker used crutches for mobility. The treatment plan included Repeat DEXA Bone Density Scan.

IMR ISSUES, DECISIONS AND RATIONALES

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

Repeat DEXA Bone Density Scan: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Lumbar Fusion.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official disability guidelines Knee and leg chapter, and bone densitometry.

Decision rationale: The patient presents on 04/07/15 with unrated lower back pain. The patient's date of injury is 09/29/09. Patient is status post hemilaminectomy at L4-L5 and L5-S1 levels in April 2011. The request is for REPEAT DEXA BONE DENSITY SCAN. The RFA is dated 04/09/15. Progress note dated 04/07/15 does not include a comprehensive physical examination, only a discussion of this patient's upcoming disc replacement surgery and medications to improve bone density. The patient is currently prescribed vitamin D, calcium supplement, Cyclobenzaprine, Gabapentin, Neurontin, Omeprazole, Pennsaid, Percocet, Restoril, and Zolof. Diagnostic imaging was not included. Patient is currently classified as disabled/permanent and stationary. Regarding bone densitometry, ODG states it is recommended for selected patients to determine whether osteoporosis is present in individuals of appropriate age and risk factors having an injury including a fracture. ODG states: "Osteoporosis does not appear to have a direct causal relationship to work injury or work exposures, so authorization of services for diagnosis or treatment of osteoporosis should not be commonly considered or approved in workers comp. It may be appropriate to monitor for osteoporosis in individuals (usually with Bone Density Measurements or DEXA scans) who are being treated for other conditions if that condition or the treatment of the condition is associated with the development of osteoporosis, for example, monitoring of an individual who is of appropriate age and treated for a condition with prednisone at doses greater than 7.5 mg per day for more than 3 months. These decisions should be made on a case-by-case basis. Due to the long-term nature, treatment of osteoporosis should require an additional agreed upon allowance on a claim. If a claim is allowed for osteoporosis, appropriate treatment would include medication and monitoring as recommend by guidelines such as those from the National Osteoporosis Foundation."In regard to the repeat DEXA bone scan, the request is appropriate. Progress notes indicate that this patient has had at least 1 DEXA bone scan in 2014, though the report was not provided. Progress note dated 04/07/15 does include discussion of the bone scan results, which showed a T-score of 1.2 in the lumbar spine and 0.7 in the femoral necks. The provider is requesting a repeat bone density scan to measure this patient's response to treatments intended to improve bone density - prior to an approved lumbar disc replacement surgery. Given this patient's history of osteopenia, recent treatments targeted towards improving bone density (which have yet to be evaluated), and the utilization of the bone scan as a pre-operative measure, a second scan is substantiated. Therefore, the request IS medically necessary.