

Case Number:	CM14-0120298		
Date Assigned:	09/12/2014	Date of Injury:	12/16/2013
Decision Date:	10/21/2014	UR Denial Date:	07/15/2014
Priority:	Standard	Application Received:	07/28/2014

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. The expert reviewer is Board Certified in American Board of Physical Medicine and Rehabilitation and is licensed to practice in Nevada. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

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 records presented for review indicate that this 47 year-old male was reportedly injured on December 16, 2013. The mechanism of injury is noted as a blunt force, to the head. The most recent progress note, dated July 22, 2014, indicates that there were ongoing complaints of daily pain. It is noted the neck pain radiates into the frontal aspect of the head and low back pain radiating the bilateral lower extremities. The physical examination demonstrated muscle spasms in the lower lumbar region. A cane is required for ambulation. Diagnostic imaging studies objectified facet joint disease. Previous treatment includes medications, chiropractic care, physical therapy, acupuncture, and other conservative care. A request had been made for electrodiagnostic studies and was not certified in the pre-authorization process on July 15, 2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

NCV left lower extremity: 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) Low Back, Nerve Conduction Studies

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

Decision rationale: As noted in the ACOEM guidelines, there is limited evidence presented to support letter diagnostic studies. The records indicate that EMG studies have been certified. Nerve conduction velocities are indicated when there are subtle findings on physical examination or the MRI is equivocal. The records reflect that the MRI is pending in the results were not reported. Therefore, there is insufficient clinical evidence presented to support the need for nerve conduction velocities when the other studies are pending. Such as, NCV left lower extremity is not medically necessary.

NCV right lower extremity: 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) Low Back, Nerve Conduction Studies

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

Decision rationale: As noted in the ACOEM guidelines, there is limited evidence presented to support letter diagnostic studies. The records indicate that EMG studies have been certified. Nerve conduction velocities are indicated when there are subtle findings on physical examination or the MRI is equivocal. The records reflect that the MRI is pending in the results were not reported. Therefore, there is insufficient clinical evidence presented to support the need for nerve conduction velocities when the other studies are pending. Such as, NCV right lower extremity is not medically necessary.