

Case Number:	CM14-0183007		
Date Assigned:	11/07/2014	Date of Injury:	09/06/2012
Decision Date:	12/11/2014	UR Denial Date:	10/13/2014
Priority:	Standard	Application Received:	11/03/2014

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 Anesthesiology, has a subspecialty in Pain Management and is licensed to practice in California. 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:

According to the records made available for review, this is a 38-year-old male with a 9/6/12 date of injury. At the time (9/23/14) of request for authorization for Dexa scan, there is documentation of subjective (back pain) and objective (mild to moderate acute distress, loss of lordotic curvature, and palpable tenderness in the thoracolumbar spine with limited range of motion) findings, current diagnoses (lumbago), and treatment to date (lumbar brace and physical therapy). Medical reports identify a request for DEXA scan to determine bone density in order to find an explanation to why the patient is having multiple fractures with low trauma. There is no documentation of the need to determine whether osteoporosis is present in individuals of appropriate age.

IMR ISSUES, DECISIONS AND RATIONALES

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

Dexa scan: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 79. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee & Leg and Low back, Bone densitometry and Bone Scan

Decision rationale: MTUS reference to ACOEM guidelines identifies that under the optimal system, a clinician acts as the primary case manager; the clinician provides appropriate medical evaluation and treatment and adheres to a conservative evidence-based treatment approach that limits excessive physical medicine usage and referral. ODG identifies documentation of the need to determine whether osteoporosis is present in individuals of appropriate age and risk factors having an injury including a fracture; or 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 (such as 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), as criteria necessary to support the medical necessity of bone density test. Within the medical information available for review, there is documentation of a diagnosis of lumbago. In addition, given documentation of request for DEXA scan to determine bone density in order to find an explanation to why the patient is having multiple fractures with low trauma, there is documentation of risk factors having an injury including a fracture. However, there is no documentation of the need to determine whether osteoporosis is present in individuals of appropriate age. Therefore, based on guidelines and a review of the evidence, the request for Dexa scan is not medically necessary.