

Case Number:	CM14-0185592		
Date Assigned:	11/13/2014	Date of Injury:	01/24/2010
Decision Date:	12/19/2014	UR Denial Date:	10/18/2014
Priority:	Standard	Application Received:	11/07/2014

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 Physical Medicine and Rehabilitation, has a subspecialty in Interventional Spine 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:

The patient is a 56-year old female with an injury date of 01/24/10. Based on the 09/08/14 progress report, the patient complains of cervical spine pain, lumbar spine pain, and left shoulder pain. She has pain in the right side of her neck, right shoulder, shoulder blade, and low back pain radiating to the legs. The patient rates her pain as a 6/10 with medications and an 8/10 without medications. The 09/29/14 report indicates that the patient's pain is consistent with a C4, C5 neuropathy. The pain radiates from her neck into her shoulder and upper lateral arm. In addition, she has pain in the posterior right leg radiating into the bottom of the foot consistent with S1 neuropathy. The patient's diagnoses include the following: 1.Cervicalgia.2. Chronic pain syndrome.3. Dysthymic disorder.4. Lumbosacral neuritis.5. Medical insomnia. 6.Myalgia.7. Neuralgia.The utilization review determination being challenged is dated 10/18/14. Treatment reports are provided from 05/13/14- 10/27/14.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective Vitamin B12 IM injection, 2cc's: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Pain (Chronic)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Mental/stress chapter, Vitamin B12 Other Medical Treatment Guideline or Medical Evidence: AETNA Clinical Policy Bulletin: Vitamin B-12 Therapy Number: 0536

Decision rationale: Based on the 09/08/14 report, the patient presents with cervical spine pain, lumbar spine pain, and left shoulder pain. The Retrospective Request is for Vitamin B12 im Injection, 2 CC'S. The report with the request was not provided. MTUS or ACOEM does not discuss vitamins ODG does not recommend Vitamin B for chronic pain condition. Aetna clinical policy guidelines also state that Vitamin B-12 Therapy injections are medically necessary with the following diagnoses or conditions: Anemia; GI disorders; neuropathy associated with malnutrition; alcoholism; pernicious anemia or Posterolateral sclerosis; Dementia secondary to B-12 deficiency; Homocystinuria; Patient's receiving Methotrexate, Almita; Methomonic aciduria; B-12 deficiency due to metformin not corrected by oral B-12; or Retrobulbar neuritis associated with heavy smoking. The physician does not discuss this treatment in the reports provided. There is no diagnosis or discussion of Vitamin B-12 deficiency. Furthermore, the patient does not present with any of the diagnosis that require Vitamin B12 therapy. Therefore, Retrospective Vitamin B12 IM injection, 2cc's is not medically necessary.