MAXIMUS Federal Services

Case Number:	CM14-0099590		
Date Assigned:	07/30/2014	Date of Injury:	08/23/2007
Decision Date:	09/03/2014	UR Denial Date:	06/23/2014
Priority:	Standard	Application Received:	06/30/2014

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 Neurology, has a subspecialty in Pain Medicine and is licensed to practice in Florida. 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:

3/25/14 note indicates cervical spine pain and evaluation for ESI. Previous MRI reported to show spondylosis from C4-5 to C6-7. There was decreased sensation in the C6 dermatome. Tremors were reported in right upper extremity on 5/6/14. Neurology consult was recommended for evaluation.

IMR ISSUES, DECISIONS AND RATIONALES

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

Neurologic Consulation (Cervical Spine): Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM, Occupational Medical Practice Guidelines, Second Edition (2004), Chapter 6, page 163.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines chronic pain - neck Page(s): 301-310. Decision based on Non-MTUS Citation Physical examination evidence of severe neurologic compromise that correlateswith the medical history and test results may indicate a need for immediateconsultation. The examination may further reinforce or reduce suspicions oftumor, infection, fracture, or dislocation.

Decision rationale: The medical records indicate neurologic deficits of sensory loss in the setting of cervical pain and cervical DJD. The insured is also noted to have new onset of

tremors. Neurologic consultation is supported to provide primary treating physician with information for diagnosis, treatment and prognosis of neurologic findings.