

Case Number:	CM15-0111570		
Date Assigned:	06/18/2015	Date of Injury:	11/19/2014
Decision Date:	07/16/2015	UR Denial Date:	05/09/2015
Priority:	Standard	Application Received:	06/09/2015

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: Emergency Medicine

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This 50-year-old woman sustained an industrial injury on 11/19/2014 when a package fell on her head. Diagnoses include headache, post-concussion syndrome, and contusion. Treatment has included oral medications. Physician notes dated 3/5/2015 show complaints of headaches, dizziness, impaired eyesight, and stiff neck. Recommendations include start Topamax, Cymbalta, with plans to increase Cymbalta at the next visit, consider Sumavel, possible Botox injections, biofeedback and cognitive therapy.

IMR ISSUES, DECISIONS AND RATIONALES

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

Botox injections for migraine headaches: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Botulinum toxin (Botox; Myobloc) Page(s): 25-26.

Decision rationale: The requested Botox injections for migraine headaches, is not medically necessary. CA MTUS 2009 - Chronic Pain Treatment Guidelines 7/18/2009, Pages 25-26, Botulinum toxin (Botox; Myobloc) noted: "Not generally recommended for chronic pain disorders, except for cervical dystonia. " The injured worker has headaches, dizziness, impaired eyesight, and stiff neck. There is insufficient documentation of cervical dystonia. The criteria not having been met, the requested Botox injections for migraine headaches is not medically

necessary.