

Case Number:	CM15-0175930		
Date Assigned:	09/17/2015	Date of Injury:	03/20/2013
Decision Date:	10/27/2015	UR Denial Date:	08/11/2015
Priority:	Standard	Application Received:	09/08/2015

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: Texas, New York, California
 Certification(s)/Specialty: Preventive Medicine, Occupational 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:

The applicant is a represented 51-year-old who has filed a claim for chronic neck pain reportedly associated with an industrial injury of March 20, 2013. In a Utilization Review report dated August 11, 2015, the claims administrator failed to approve a request for cervical MRI imaging. The claims administrator referenced an RFA form received on August 4, 2015 and an associated office visit of July 13, 2015 in its determination. The claims administrator did not seemingly incorporate any guidelines into its determination. The applicant's attorney subsequently appealed. On said July 13, 2015 progress note, the applicant reported ongoing complaints of neck pain with associated intermittent pain about the periscapular musculature and right arm. The applicant had reported difficulty sleeping. The applicant contended that her neck pain had worsened. The applicant had tenderness about the cervical spine with associated spasm and guarding. The applicant was described as having undergone earlier successful right shoulder surgery. Cervical MRI imaging was sought to rule out discogenic disease. The claimant was asked to continue using Motrin and Zantac in the interim. The claimant's work status was not furnished.

IMR ISSUES, DECISIONS AND RATIONALES

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

Repeat MRI of the Cervical Spine: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM, Cervical & Thoracic Spine Disorders, Magnetic Resonance Imaging.

MAXIMUS guideline: Decision based on MTUS Neck and Upper Back Complaints 2004, Section(s): Summary.

Decision rationale: No, the request for repeat MRI imaging of the cervical spine was not medically necessary, medically appropriate, or indicated here. While the MTUS Guideline in ACOEM Chapter 8, Table 8-8, page 182 does recommend MRI or CT imaging of the cervical spine to help validate a diagnosis of nerve root compromise, based on clear history and physical exam findings, in preparation for an invasive procedure. Here, however, the attending provider's July 13, 2015 progress note did not depict the presence of nerve root compromise referable to the cervical spine and/or upper extremities. Rather, the treating provider stated that cervical MRI imaging was being sought for the purposes of ruling out discogenic disease as opposed to the nerve root compromise for which the MTUS Guideline in ACOEM Chapter 8, Table 8-8, page 182 recommends cervical MRI imaging. The applicant's muscular pain and/or scapular pain present on July 13, 2015 seemingly argued against the presence of any nerve root compromise referable to the cervical spine and/or upper extremities. There was no mention of the applicant's considering or contemplating any kind of surgical intervention based on the outcome of the study in question on said July 13, 2015 progress note. The attending provider did not state how (or if) the MRI imaging at issue would have influenced or altered the treatment plan. Therefore, the request was not medically necessary.