

Case Number:	CM15-0026267		
Date Assigned:	02/18/2015	Date of Injury:	03/27/2006
Decision Date:	04/01/2015	UR Denial Date:	01/29/2015
Priority:	Standard	Application Received:	02/11/2015

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: Physical Medicine & Rehabilitation, Pain Management

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 injured worker is a 64 year old male, who sustained an industrial injury on March 27, 2006. His diagnoses include cervical myelopathy, cervical degenerative disc disease, neck pain, and parasthesias/numbness. Electrodiagnostic studies were performed on November 22, 2013, and an MRI of the cervical spine was performed on December 18, 2013. On January 14, 2015, his treating physician reports neck pain that is now radiating to the shoulders, with infrequent numbness and tingling in the back of his hand. He has walks with incoordination. His pain level is 5/10 without medication, and his current pain medication reduces hi pain to 3/10. Current medication includes an analgesic and an anticonvulsant. The physical exam revealed mild tenderness of the paracervical muscles, moderately decreased cervical range of motion, normal upper extremity reflexes with intact sensation and normal strength, negative Hoffman's and clonus, and significant difficulty with tandem walking. The treatment plan includes a request for an updated MRI. On January 29, 2015, Utilization Review non-certified a request for an MRI of the cervical spine, noting the lack of presentation as having a neurological dysfunction nor as a surgical candidate, and the lack of presenting evidence of physiological study being done showing evidence of radiculopathy. The California Medical Treatment Utilization Schedule (MTUS): ACOEM (American College of Occupational and Environmental Medicine) Guidelines were cited.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI of Cervical Spine: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 176-177. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Neck Chapter, MRI.

Decision rationale: Regarding the request for repeat cervical MRI, guidelines support the use of imaging for emergence of a red flag, physiologic evidence of tissue insult or neurologic deficit, failure to progress in a strengthening program intended to avoid surgery, and for clarification of the anatomy prior to an invasive procedure. Guidelines also recommend MRI after 3 months of conservative treatment. ODG states that repeat MRI is not routinely recommended in less there is a significant change in symptoms and or findings suggestive of significant pathology. Within the documentation available for review, there is no indication of any red flag diagnoses. Additionally, there is no documentation of changed subjective complaints or objective findings since the time of the most recent cervical MRI. In the absence of such documentation the requested cervical MRI is not medically necessary.