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| Case Number: | CM15-0040626 | | |
| Date Assigned: | 03/10/2015 | Date of Injury: | 11/24/2010 |
| Decision Date: | 05/26/2015 | UR Denial Date: | 02/12/2015 |
| Priority: | Standard | Application Received: | 03/03/2015 |

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 40-year-old who has filed a claim for chronic neck and low back pain reportedly associated with an industrial injury of November 24, 2010. In a Utilization Review report dated February 12, 2015, the claims administrator failed to approve a request for cervical MRI imaging. Non-MTUS ODG guidelines were invoked despite the fact that the MTUS addressed the topic. A progress note of January 29, 2015 and associated RFA form of February 2, 2015 were referenced in the determination. The applicant's attorney subsequently appealed. The claims administrator's medical evidence log, however, did not seemingly include or incorporate either the January 29, 2015 progress note or the February 2, 2015 RFA form in its determination. Several handwritten physical therapy progress notes were on file, including a progress note of December 4, 2014, in which the applicant received therapeutic massage, infra red therapy, and electrical stimulation. In a progress note dated October 30, 2014, the applicant reported ongoing complaints of neck and back pain. A 30-pound lifting limitation was imposed. It did not appear that the applicant was working with said limitation in place. The remainder of the file was surveyed. The progress notes on file made no mention of the need for cervical MRI imaging.

IMR ISSUES, DECISIONS AND RATIONALES

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

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 Official Disability Guidelines (ODG) MRI.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 182.

Decision rationale: No, the request for cervical MRI imaging 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, in this case, however, there was no mention of the applicant's actively considering or contemplating any kind of invasive procedure involving the cervical spine. While it is acknowledged that the January 29, 2015 progress note made available to the claims administrator was not incorporated into the IMR packet, the historical notes on file did not, however, support or substantiate the request. Therefore, the request was not medically necessary.