

Case Number:	CM15-0067451		
Date Assigned:	04/15/2015	Date of Injury:	05/08/2014
Decision Date:	05/19/2015	UR Denial Date:	03/11/2015
Priority:	Standard	Application Received:	04/09/2015

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: 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:

Shoulder, knee, and groin pain reportedly associated with an industrial injury of May 8, 2015. In a Utilization Review report dated March 11, 2015, the claims administrator failed to approve a request for MRI imaging of the pelvis. The claims administrator referenced a progress note dated February 23, 2015, in its determination. The applicant's attorney subsequently appealed. On April 6, 2015, the applicant reported ongoing complaints of abdomen/groin and knee pain, 4 to 7/10. The applicant did not appear to be working with a 15-pound lifting limitation in place, it was reported. The applicant was given diagnoses, which included inguinal hernia. In March 11, 2015 supplemental report, the treating provider stated that the applicant has had earlier CT imaging of the abdomen and pelvis, which demonstrated a myotendinous injury, not fully characterized. The attending provider stated that MRI imaging was being endorsed for better characterizing the applicant's groin issues. On February 23, 2015, the applicant reported ongoing complaints of groin pain, highly variable, 7 to 9/10. A 15-pound lifting limitation was endorsed. MRI imaging was thought to better characterize the applicant's groin pain and/or myotendinous injuries of the same. It was stated that CT imaging of the abdomen and pelvis had proven non-diagnostic. On October 13, 2014, the attending provider stated the applicant had CT imaging of the abdomen and pelvis demonstrating soft tissue changes in the right subcutaneous abdominal fat, likely a manifestation of some sort of myotendinous injury.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI of the pelvis: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines-Treatment in Workers' Compensation, Online Edition Chapter: Hip & Pelvis (Acute & Chronic) MRI (magnetic resonance imaging).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Amended 2014 (Resolution 39) ACR PRACTICE PARAMETER FOR THE PERFORMANCE OF MAGNETIC RESONANCE IMAGING (MRI) OF THE SOFT-TISSUE COMPONENTS OF THE PELVIS.

Decision rationale: Yes, the proposed MRI imaging of the abdomen and pelvis was medically necessary, medically appropriate, and indicated here. The MTUS does not address the topic. However, the American College of Radiology (ACR) notes that MRI imaging of the pelvis is a useful tool in the evaluation of diseases of the male and female pelvic organs. MRI imaging of pelvis, per ACR, is the imaging modality of choice in applicants in whom soft tissue pathology is suspected. Here, the requesting provider has seemingly suggested that the applicant has fairly severe groin pain ranging from 7 to 9/10. The applicant's groin pain has apparently prevented the applicant from returning to work. A soft tissue abnormality was apparently appreciated on earlier CT imaging of the abdomen and pelvis. The said soft tissue abnormality was incompletely characterized. Said soft tissue abnormality had failed to respond favorably to conservative treatment in the form of time, medications, observation, etc. Moving forward with MRI imaging was, thus, indicated to better characterize the extent of the same. Therefore, the request was medically necessary.