

Case Number:	CM15-0067882		
Date Assigned:	04/15/2015	Date of Injury:	06/24/2014
Decision Date:	05/27/2015	UR Denial Date:	03/12/2015
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:

The applicant is a represented 47-year-old who has filed a claim for chronic hip and thigh pain reportedly associated with an industrial injury of June 24, 2014. In a Utilization Review report dated March 12, 2015, the claims administrator failed to approve a request for a hip MRI. The claims administrator referenced progress notes and RFA forms of February 25, 2015 and January 28, 2015 in its determination. The applicant's attorney subsequently appealed. On January 28, 2015, the applicant reported ongoing complaints of hip and thigh pain. Earlier MRI imaging had demonstrated a possible tear of the thigh musculature. The applicant had been off of work for three months, it was reported. A palpable defect was noted about the anterior thigh, it was reported in the subjective section of the note. The applicant's gait, however, was normal, it was noted in the objective section of the note. No masses or muscle atrophy were appreciated about the hip or knee. Work restrictions were endorsed. MRI imaging of the thigh, hip, and both knees was ordered for the purposes of completing the applicant's evaluation. The attending provider did allude to earlier MRI imaging of the thigh dated November 18, 2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI OF (R) HIP WITHOUT CONTRAST: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITIES GUIDELINES.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Occupational Medicine Practice Guidelines, Hip and Groin Disorders, page 12 Magnetic Resonance Imaging (MRI) MRI for routine evaluation of acute, sub acute, or chronic hip joint pathology, including degenerative joint disease Not Recommended, Insufficient Evidence (I).

Decision rationale: No, the request for MRI imaging of the right hip without contrast was not medically necessary, medically appropriate, or indicated here. The MTUS does not address the topic. However, the Third Edition ACOEM Guidelines Hip Chapter notes that MRI imaging is not recommended in the routine evaluation of acute, sub acute, or chronic hip pathology, including degenerative joint disease. Here, the attending provider concurrently ordered MRI imaging of the hip, thigh, and bilateral knees. The attending provider stated that he was performing these studies for routine evaluation purposes. The attending provider, thus, had no clearly formed intent of acting on the results of the same. Earlier MRI imaging of November 2014, the treating provider acknowledged was suggestive of a hamstring strain/hamstring tear, the treating provider reported. The prior positive test results, thus, effectively obviated the need for repeat imaging, it is further noted. Therefore, the request was not medically necessary.