

Case Number:	CM15-0094519		
Date Assigned:	05/20/2015	Date of Injury:	06/13/2013
Decision Date:	06/22/2015	UR Denial Date:	04/21/2015
Priority:	Standard	Application Received:	05/15/2015

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: Arizona, California

Certification(s)/Specialty: Family Practice

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 54-year-old male who sustained an industrial injury on June 13, 2013. He has reported back pain and has been diagnosed with post-concussion syndrome, mild to moderate CTS bilaterally, significant cervicogenic disc disease, and rule out worsening spinal stenosis as cause for his lower extremity tingling and numbness. Treatment has included surgery, medical imaging, medications, and psychological care. Cervical curve was present. Flexion, extension, lateral flexion and rotation to the left and right was normal. Range of motion was normal. There was tenderness noted in the cervical spine paraspinal muscles. MRI of the cervical spine dated August 12, 2013 revealed moderate bilateral neuroforaminal narrowing at cervical 5-6, mild to moderate neural foraminal narrowing cervical 6-7, moderate left and mild right neural foraminal narrowing at 78. Superimposed congenital narrowing developmentally Disc osteophyte complex largest at cervical C7 with mild effacement of the anterolateral thecal sac. MRI of the brain was normal. The treatment request included a functional restoration program evaluation.

IMR ISSUES, DECISIONS AND RATIONALES

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

Functional Restoration Program Evaluation: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Functional restoration program Page(s): 30-33.

Decision rationale: According to the guidelines, outpatient pain rehabilitation programs may be considered medically necessary when all of the following criteria are met: (1) An adequate and thorough evaluation has been made, including baseline functional testing so follow-up with the same test can note functional improvement; (2) Previous methods of treating chronic pain have been unsuccessful and there is an absence of other options likely to result in significant clinical improvement; (3) The patient has a significant loss of ability to function independently resulting from the chronic pain; (4) The patient is not a candidate where surgery or other treatments would clearly be warranted (if a goal of treatment is to prevent or avoid controversial or optional surgery, a trial of 10 visits may be implemented to assess whether surgery may be avoided); (5) The patient exhibits motivation to change, and is willing to forgo secondary gains, including disability payments to effect this change; & (6) Negative predictors of success above have been addressed. In this case, the claimant's pain is worsening and has undergone therapy, medications and balance educations. Surgical consultation was made again but was previously deferred to give conservative measures a chance. The request for an FRP evaluation is appropriate and medically necessary.