

MAXIMUS FEDERAL SERVICES, INC.

Independent Medical Review

P.O. Box 138009

Sacramento, CA 95813-8009

(855) 865-8873 Fax: (916) 605-4270



Notice of Independent Medical Review Determination

Dated: 12/9/2013

[REDACTED]

[REDACTED]

Employee:	[REDACTED]
Claim Number:	[REDACTED]
Date of UR Decision:	7/8/2013
Date of Injury:	9/2/2008
IMR Application Received:	7/31/2013
MAXIMUS Case Number:	CM13-0005552

- 1) MAXIMUS Federal Services, Inc. has determined the request for **chiropractic care for the low back is not medically necessary and appropriate.**

INDEPENDENT MEDICAL REVIEW DECISION AND RATIONALE

An application for Independent Medical Review was filed on 7/31/2013 disputing the Utilization Review Denial dated 7/8/2013. A Notice of Assignment and Request for Information was provided to the above parties on 9/18/2013. A decision has been made for each of the treatment and/or services that were in dispute:

- 1) MAXIMUS Federal Services, Inc. has determined the request for **chiropractic care for the low back** is not **medically necessary and appropriate**.

Medical Qualifications of the Expert Reviewer:

The independent Medical Doctor who made the decision has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Chiropractic/Acupuncture, has and is licensed to practice in California. 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 treatments and/or services at issue.

Expert Reviewer Case Summary:

The claimant is a 67 year old male who was involved in a work related injury on September 2, 2008. The claimant complains of ongoing low back pain and bilateral leg pain and numbness in toes. He has burning pain in his right gluteus and stabbing pain down the hamstring. He has weakness in his legs and limited range of motion. At times, he has problems sleeping due to pain. His diagnoses are chronic back pain, peripheral neuropathy, and lumbar radiculopathy. On May 1, 2013, the claimant rated his pain as 4-5/10 and was taking tizandine and tramadol 150 mg as medications. He has previously had chiropractic therapy for his pain. It is unclear how many actual sessions of chiropractic this patient has had. He has had at least 9 sessions as submitted through the documentation. The claimant reported that he had 8 total chiropractic sessions on May 1, 2013. On May 8, 2013, the claimant appears to have started with another chiropractor, [REDACTED] D.C. The claimant states that chiropractic therapy has helped with decreasing pain and increasing function. However, his pain has fluctuated throughout the documentation and there is no increase of function documented. He has remained permanent and stationary and taking the same medications. There is also no documentation of flare-ups.

Documents Reviewed for Determination:

The following relevant documents received from the interested parties and the documents provided with the application were reviewed and considered. These documents included:

- Application of Independent Medical Review
- Utilization Review Determination
- Medical Records from Claims Administrator
- Medical Treatment Utilization Schedule (MTUS)

1) Regarding the request for chiropractic care for the low back:

Section of the Medical Treatment Utilization Schedule Relied Upon by the Expert Reviewer to Make His/Her Decision

The Claims Administrator based its decision on the Chronic Pain Medical Treatment Guidelines, page 58-59, which are a part of the MTUS.

The Expert Reviewer based his/her decision on the Chronic Pain Medical Treatment Guidelines (2009), pages 58-60, which are part of the MTUS.

Rationale for the Decision:

According to evidence-based guidelines, a trial of six chiropractic visits is warranted for chronic pain due to musculoskeletal conditions in the low back. However, further visits are only medically necessary if there is objective functional improvement from the trial. The employee has had a trial of therapy of of chiropractic treatments. There is no documented functional improvement from prior chiropractic treatment. The employee has remained permanent and stationary. The employee's function levels, objective exam findings, and medications have not changed. Therefore, six further chiropractic sessions are not medically necessary. **The request for chiropractic care for the low back is not medically necessary and appropriate.**

Effect of the Decision:

The determination of MAXIMUS Federal Services and its physician reviewer is deemed to be the final determination of the Administrative Director, Division of Workers' Compensation. With respect to the medical necessity of the treatment in dispute, this determination is binding on all parties.

In accordance with California Labor Code Section 4610.6(h), a determination of the administrative director may be reviewed only if a verified appeal is filed with the appeals board for hearing and served on all interested parties within 30 days of the date of mailing of the determination to the employee or the employer. The determination of the administrative director shall be presumed to be correct and shall be set aside only upon proof by clear and convincing evidence of one or more of the grounds for appeal listed in Labor Code Section 4610.6(h)(1) through (5).

Sincerely,

Paul Manchester, MD, MPH
Medical Director

cc: Department of Industrial Relations
Division of Workers' Compensation
1515 Clay Street, 18th Floor
Oakland, CA 94612

/dso

Disclaimer: MAXIMUS is providing an independent review service under contract with the California Department of Industrial Relations. MAXIMUS is not engaged in the practice of law or medicine. Decisions about the use or nonuse of health care services and treatments are the sole responsibility of the patient and the patient's physician. MAXIMUS is not liable for any consequences arising from these decisions.