

Case Number:	CM13-0006819		
Date Assigned:	11/01/2013	Date of Injury:	02/21/2012
Decision Date:	08/01/2014	UR Denial Date:	07/11/2013
Priority:	Standard	Application Received:	08/05/2013

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. The expert reviewer is Board Certified in Occupational Medicine 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 disputed items/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This patient is a 28 y/o male, DOI 2/21/12. Subsequent to his injury he developed persistent spinal pain associated with an L5 radiculopathy. When the request for an Functional Capacity Evaluation (FCE) was made, he had been treated with physical therapy, epidural injections and oral analgesics. He was not given any modified work duties and there is no reports of failed efforts to return to work. The records do not contain any specific rationale supporting the request for the FCE. In addition, there are no reported communications with any employer(s).

IMR ISSUES, DECISIONS AND RATIONALES

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

FUNCTIONAL CAPACITY EVALUATION (FCE): Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Functional Improvement Measures Page(s): 48. Decision based on Non-MTUS Citation ODG Fitness for Duty, FCE.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 2 General Approach to Initial Assessment and Documentation Page(s): 21,22. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Fitness for Duty, Functional Capacity Evaluations.

Decision rationale: Both MTUS ACOEM Guidelines and ODG Guidelines point out the medical necessity of having specific return to work plans for a Functional Capacity Evaluation

(FCE) to be medically useful. This request for an FCE is not associated with any return to work plans. There is no documentation of communications with an employer for a specific job task nor is the request for an FCE associated with any documented plans for a return to work in the near future. The FCE is not medically necessary under these circumstances.