

Case Number:	CM13-0009365		
Date Assigned:	09/13/2013	Date of Injury:	04/18/2002
Decision Date:	06/13/2014	UR Denial Date:	07/23/2013
Priority:	Standard	Application Received:	08/09/2013

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 Physical Medicine and Rehabilitation, has a subspecialty in Pain Management 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 is a male patient with a date of injury of April 18, 2002. A utilization review determination dated July 23, 2013 recommends, not medically necessary of functional capacity evaluation. A progress report dated July 9, 2013 identifies subjective complaint stating, "He states that the medications are helping but he does not like to use the Fluriflex ointment at night as it ruins his sheets. He uses it as much as possible, but he cannot use it with long pants and he also exercises in the pool. He states that his pain is a little higher right now because he went for a walk this morning, but it is usually around 1 - 2/10." Objective examination findings include vital signs. Diagnoses include chronic pain syndrome, internal derangement of the knee, joint pain in the leg, and medical insomnia. Treatment plan recommends medications, acupuncture, aquatic therapy, and TENS unit. A functional capacity evaluation dated July 16, 2013 was provided for review. A progress report dated June 18, 2013 recommends a saliva DNA test, acupuncture, water-based physical therapy, and medications.

IMR ISSUES, DECISIONS AND RATIONALES

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

ONE FUNCTIONAL CAPACITY EVALUATION: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 12.

Decision rationale: Regarding request for functional capacity evaluation, Occupational Medicine Practice Guidelines state that there is not good evidence that functional capacity evaluations are correlated with a lower frequency of health complaints or injuries. ODG states that functional capacity evaluations are recommended prior to admission to a work hardening program. The criteria for the use of a functional capacity evaluation includes case management being hampered by complex issues such as prior unsuccessful return to work at times, conflicting medical reporting on precautions and/or fitness for modified job, or injuries that require detailed explanation of a worker's abilities. Additionally, guidelines recommend that the patient be close to or at maximum medical improvement with all key medical reports secured and additional/secondary conditions clarified. Within the documentation available for review, there is no indication that there has been prior unsuccessful return to work attempts, conflict and medical reporting, or injuries that would require detailed exploration. Additionally, it does not appear that the patient is close to or at maximum medical improvement, as the requesting physician feels that conservative care is still indicated. In the absence of clarity regarding these issues, the currently requested functional capacity evaluation is not medically necessary.