

Case Number:	CM13-0028711		
Date Assigned:	03/03/2014	Date of Injury:	05/17/2013
Decision Date:	06/20/2014	UR Denial Date:	09/04/2013
Priority:	Standard	Application Received:	09/25/2013

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:

According to the records made available for review this is a 49-year-old male with a date of injury of August 30, 2013. At the examination prior to the request for authorization of Irlen Spectral Filter Lenses and "assessment to determine if other evaluations are needed" on July 25, 2013; the requesting neurologist documented subjective complaints of headache with nausea and vomiting and photosensitivity. Objective findings included tenderness over the temporalis muscles popping in the jaw, poor balance and severe disorganization. He was reported to be wearing dark glasses. The requesting physician's impression was a closed head injury with increased symptoms because of prior traumatic injury. The physician noted prior treatment for Post-traumatic Stress Disorder (PTSD) at the [REDACTED]. He stated that there were features of Irlen syndrome, temporomandibular joint syndrome, and labyrinthine disorder. On August 30, 2013 there was documentation of requests for Irlen lenses and assessment to determine if other evaluations are needed. There was no documentation of an eye or neurological examination or specific descriptions of poor balance or severe disorganization.

IMR ISSUES, DECISIONS AND RATIONALES

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

IRLEN SPECTRAL FILTER INDOOR/OUTDOOR LENSES: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Aetna Clinical Policy Bulletin, Learning Disabilities, Dyslexia, and Vision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation An Aetna Clinical Policy Bulletin on Learning disabilities, dyslexia and vision discusses Irlen syndrome.

Decision rationale: There was no documentation that the patient had or has learning disabilities or dyslexia. Even so, the existence of Irlen syndrome is controversial. Irlen syndrome is said to be a visual/perception dysfunction that [REDACTED] stated was related to dyslexia and learning disabilities. Systematic reviews reveal insufficient evidence of effectiveness of colored lenses. Colored lenses are non-prescription and not medically necessary.

ASSESSMENT TO DETERMINE IF OTHER EVALUATIONS ARE NEEDED: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: AMERICAN COLLEGE OF OCCUPATIONAL AND ENVIRONMENTAL MEDICINE, CHAPTER: INDEPENDANT MEDICAL EXAMINATIONS AND CONSULTATION, 127, 156.

MAXIMUS guideline: The Expert Reviewer did not cite any medical evidence for its decision.

Decision rationale: This request is unclear. The California MTUS, Official Disability Guidelines and ACOEM do not address non-specific requests. It appears to be a request for a consultation but the specialty and issues were not documented. A neuropsychological assessment and vestibular testing at a specialty-treating center was previously authorized. According to a treating physician's discussion with a nurse at another physician's office, additional requests might follow after the neuropsychological testing is done. An open-ended request without specifics are not medically necessary as it is not possible to address undocumented issues and diagnoses.