

Case Number:	CM13-0034890		
Date Assigned:	12/11/2013	Date of Injury:	10/22/2012
Decision Date:	02/14/2014	UR Denial Date:	09/25/2013
Priority:	Standard	Application Received:	10/15/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Internal Medicine and Cardiology, has a subspecialty in Cardiovascular Diseases and is licensed to practice in Texas. 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 physician 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:

The patient is a 35-year-old male who reported an injury on 10/22/2012 after his prosthetic became loose, causing him to fall. The patient's most recent physical examination findings revealed tenderness to palpation over the lumbar paravertebral musculature bilaterally. The patient's diagnoses included status post below-the-knee amputation due to osteomyelitis. The patient's treatment plan included a Functional Capacity Evaluation.

IMR ISSUES, DECISIONS AND RATIONALES

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

functional capacity evaluation: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Page(s): 137-138.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 77-79. Decision based on Non-MTUS Citation Official Disability Guidelines, Fitness for Duty Chapter, Functional Capacity Evaluations

Decision rationale: The requested functional capacity evaluation (FCE) is not medically necessary or appropriate. The American College of Occupational and Environmental Medicine states that the use of a FCE to obtain a more precise delineation of a patient's capabilities than is available from routine physical examination and notes may be necessary under some

circumstances. However, the Official Disability Guidelines do not recommend a FCE unless the patient is at or near Maximum Medical Improvement (MMI). The clinical documentation submitted for review does not provide any evidence that the patient is at MMI. It is specifically noted that the patient is not at MMI. Therefore, a FCE would not be indicated. As such, the requested FCE is non-certified.