

Case Number:	CM13-0046877		
Date Assigned:	12/27/2013	Date of Injury:	06/13/2013
Decision Date:	03/07/2014	UR Denial Date:	10/25/2013
Priority:	Standard	Application Received:	11/12/2013

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 Physical Medicine and Rehabilitation, has a subspecialty in Pain 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 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 64-year-old female with a date of injury of June 13, 2013. The patient experiences pain in the neck, mid back, bilateral wrists, shoulders, and low back. The patient's medical condition is further complicated by epigastric pain consistent with gastroesophageal reflux, anxiety, post-traumatic stress, depression, and possible irritable bowel syndrome for which she has seen a gastroenterologist. The patient has also been under the care of a psychologist. Conservative treatments include physical therapy, chiropractic treatment, and pain medications. The disputed issue in this case is a request for a functional capacity evaluation (FCE), which has already been carried out. The utilization review determination had non-certified the request citing the Official Disability Guidelines.

IMR ISSUES, DECISIONS AND RATIONALES

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

retrospective request for one (1) functional capacity evaluation (FCE) on October 4, 2013:
Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Fitness for Duty Chapter, Procedure Summary, Functional capacity evaluation (FCE).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Independent Medical Examinations and Consultations

Chapter (ACOEM Practice Guidelines, 2nd Edition (2004), Chapter 7) page(s) 137-138; and the Official Disability Guidelines (ODG) Functional Capacity Evaluations.

Decision rationale: According to the ACOEM Guidelines, "The employer or claim administrator may request functional ability evaluations, also known as Functional Capacity Evaluations, to further assess current work capability. These assessments also may be ordered by the treating or evaluating physician, if the physician feels the information from such testing is crucial. Functional capacity evaluations may establish physical abilities, and also facilitate the examinee/employer relationship for return to work. However, FCEs can be deliberately simplified evaluations based on multiple assumptions and subjective factors, which are not always apparent to their requesting physician." Furthermore, the ODG discuss the complexities of a FCE and include suggested criteria to be met prior to a FCE. "If a worker is actively participating in determining the suitability of a particular job, the FCE is more likely to be successful. A FCE is not as effective when the referral is less collaborative and more directive. It is important to provide as much detail as possible about the potential job to the assessor. Job specific FCEs are more helpful than general assessments." The above guidelines indicate that there are differing requirements for a functional capacity evaluation depending on which guidelines are selected. The ACOEM guidelines specify that the health practitioner may request a functional capacity evaluation if it is felt to be crucial, but does caution on interpretation of these results. These guidelines do not require failed attempts to return to work or specify timing issues. Based on these guidelines, the request for a functional capacity evaluation in this patient with chronic pain complicated by psychological issues and non-orthopedic issues such as GERD, is recommended for certification.