

Case Number:	CM13-0053548		
Date Assigned:	06/09/2014	Date of Injury:	11/11/2010
Decision Date:	07/30/2014	UR Denial Date:	10/25/2013
Priority:	Standard	Application Received:	11/05/2013

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 Physical Medicine and Rehabilitation 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:

The injured worker is a 33-year-old female who reported an injury on 11/11/2010. The mechanism of injury was noted to be a fall. The injured worker's treatments were noted to be chiropractic care, physical therapy, medications, injections, functional restoration program, and work conditioning. The injured worker's diagnoses were noted to be low back pain, sacroiliac pain, and lumbar sprain/strain. A primary treating physician's progress report dated 09/20/2013 documented subjective complaints of the injured worker noting she needed Functional Capacity Evaluation before completion of the work conditioning program. The objective findings included increased range of motion, decreased spasms, positive Kemp's, and positive straight leg raise. The treatment plan included a request for Functional Capacity Evaluation. The provider's rationale for the requested Functional Capacity Evaluation was provided within the primary treating physician's progress report dated 09/20/2013. A request for authorization for medical treatment was also provided within the documentation dated 09/20/2013.

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: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Fitness for Duty, Functional capacity evaluation (FCE).

Decision rationale: The Official Disability Guidelines recommend Functional Capacity Evaluation prior to admission to a work hardening program, with preference for assessments tailored to a specific task or job. If a worker is actively participating in determining the suitability of a particular job, the Functional Capacity Evaluation is more likely to be successful. A Functional Capacity Evaluation is not as effective when the referral is less collaborative and more directive. It is more important to provide as much detail as possible about the potential job to the assessor. Job specific Functional Capacity Evaluations are more helpful than general assessments. The report should be accessible to all return to work participants. Do not proceed with a Functional Capacity Evaluation when the sole purpose is to determine a worker's effort or compliance; or the worker has returned to work and an ergonomic assessment has not been arranged. The primary treating physician's progress report dated 09/20/2013 fails to indicate a job specific assessment for the injured worker. There was not an indication that the injured worker is actively participating in determining her suitability for a particular job according to the guidelines this is what makes a Functional Capacity Evaluation more likely to be successful. Therefore, the request for Functional Capacity Evaluation is not medically necessary.