MAXIMUS Federal Services

Case Number:	CM13-0055489		
Date Assigned:	12/30/2013	Date of Injury:	10/22/2009
Decision Date:	03/25/2014	UR Denial Date:	11/13/2013
Priority:	Standard	Application Received:	11/21/2013

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 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 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 applicant is a represented [redacted] employee who has filed a claim for chronic low back pain, shoulder pain, elbow pain, lateral epicondylitis, and carpal tunnel syndrome reportedly associated with an industrial injury of October 22, 2009. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representation; transfer of care to and from various providers in various specialties; sacroiliac joint injections; unspecified amounts of cognitive behavioral therapy; an earlier functional capacity evaluation in 2010; and extensive periods of time off of work, on total temporary disability. In a Utilization Review Report of November 13, 2013, the claims administrator denied a request for functional capacity testing, using non-MTUS ODG Guidelines. In a December 18, 2013 progress note, the attending provider appealed the denial, stating that the FCE will help him assign work limitations and work capacity. An earlier handwritten note of November 26, 2013 is sparse, difficult to follow, and not entirely legible. The applicant reports persistent low back and neck pain with associated limited range of motion about the same. The applicant is asked to continue a TENS unit, employ acupuncture, and start cognitive behavioral therapy. The applicant is apparently not working.

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: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 125. Decision based on Non-MTUS Citation While page 125 of the MTUS Chronic Pain Medical Treatment Guidelines does support usage of functional capacity evaluations as precursor to enrolment in a work conditioning program, in this case, however, there is no indication that the applicant is intent on enrol

Decision rationale: While page 125 of the MTUS Chronic Pain Medical Treatment Guidelines does support usage of functional capacity evaluations as precursor to enrolment in a work conditioning program, in this case, however, there is no indication that the applicant is intent on enrolling in a work hardening or working conditioning program. There is no indication that the applicant is intent on returning to work. There is no indication that the applicant has a job to return to. Contrary to what was suggested by the attending provider, moreover, that Chapter 7 ACOEM Guidelines state that FCEs are overly used, widely promoted, and are not necessarily an accurate characterization or representation of what an applicant can or cannot do in the workplace. In this case, the applicant does not have a job to return to, is not intent on returning to the workplace and/or workforce, and is not intent on enrolling in work hardening or work conditioning; an FCE here is, by definition, superfluous. Therefore, the request is not certified.