MAXIMUS Federal Services

Case Number:	CM13-0055728		
Date Assigned:	12/30/2013	Date of Injury:	08/05/2002
Decision Date:	04/01/2014	UR Denial Date:	11/15/2013
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 Internal Medicine and is licensed to practice in Washington DC and Virginia. He/she has been in active clinical practice for more than five years and is currently working least at 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:

This is a 61-year-old man who sustained injury on Aug 5 2002 secondary to work-related stress while working as a Deputy Sheriff. The patient had a stent placed into one of his coronary vessels in Aug 2002. He had a cardiac catheterization and angiography in 2007. On Nov 12 2012, [redacted] saw the patient and noted shortness of breath with chest discomfort. He was prescribed the following: Tricor 48 mg daily, Vitamin D. Additional testing was ordered which included: EndoPAT brain natriuretic peptide, lipid panel, metabolic panel, CBC. On Nov 20 2012, [redacted] saw the patient and ordered CBC, metabolic panel, lipid panel, total CK, Hemoglobin AiC. A request for EndoPAT was made but not certified.

IMR ISSUES, DECISIONS AND RATIONALES

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

Endo-Pat: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lipid Management in adults.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation
http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3303545/

Decision rationale: This patient had a cardiac event, which required multiple interventions for treatment and monitoring for risk stratification. EndoPAT is a device used to detect damage to the endothelium of blood vessels to predict ongoing issues with new ischemic events. There are no MTUS guidelines that offer advice in regards to this type of testing. By review of PubMed, it appears that EndoPAT testing is not consistent. Surprisingly, the EndoPAT did not demonstrate differences in endothelial function between healthy volunteers and renally impaired patients with known vascular disease or diabetic patients. As the device still appears to be in a testing phase, it is not medically indicated.