

Case Number:	CM13-0057740		
Date Assigned:	06/11/2014	Date of Injury:	04/29/2006
Decision Date:	07/14/2014	UR Denial Date:	10/30/2013
Priority:	Standard	Application Received:	11/25/2013

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 Preventive Medicine, has a subspecialty in Occupational Medicine 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 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 61 year-old male who is reported to have sustained work related injuries on 04/29/06. The mechanism of injury is reported to be a slip and fall. He has complaints of shoulder and back pain. Treatment to date has included medications, physical therapy, and aquatic therapy. The records indicate he is status post anterior cervical discectomy on 08/23/07, right shoulder arthroscopy on 05/18/08, SCS trial on 03/08/10, Doppler Study of the bilateral lower extremities on 06/28/13, and cardiac hemodynamic study on 07/29/13. This study indicated both systolic and diastolic hypertension and elevated mean arterial pressure. Most current physical examination is dated 11/06/13. The injured worker is noted to remain hypertensive, has reduced cervical range of motion, diminished sensation in the bilateral hands, shoulder pain, low back pain, and positive straight leg on the right. The record contains a utilization review determination dated 10/30/13 in which a request for CPT 93720 Impedance Plethsmography was non-certified.

IMR ISSUES, DECISIONS AND RATIONALES

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

HEMODYNAMIC STUDY: 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 Harrison's Principles and Practice of Internal Medicine. Rubin LJ, Hopkins W. Diagnostic evaluation of pulmonary hypertension. Last reviewed February 2012.

Decision rationale: The request for hemodynamic study is not supported as medically necessary. The submitted clinical records indicate the injured worker has chronic pain associated with workplace injuries occurring on 04/29/06. The records indicate he has been maintain on oral medications and has uncontrolled hypertension. The records reflect that the injured worker underwent a cardiac hemodynamic study on 07/29/13. This report indicated the expected elevated systolic and diastolic pressures with an elevated Mean Arterial Pressure. The CPT code 93720 is for plethysmography which is a noninvasive technique for measuring the blood flow to an organ, body region, or limb. A variety of plethysmographic techniques are available. The most useful measure: (1) the physical dimensions or electrical properties of an organ or body part or (2) blood flow velocity with ultrasound. Plethysmography is used to diagnose deep vein thrombosis and arterial occlusive disease. Plethysmography is used as the sole diagnostic modality for these conditions or as an initial evaluation to determine the need for venography or arteriography. The records fail to provide an indication for the request. There is no data to suggest that the injured worker has digressed. As such the medical necessity is not established.