

Case Number:	CM13-0058284		
Date Assigned:	06/09/2014	Date of Injury:	04/30/2003
Decision Date:	08/13/2014	UR Denial Date:	11/14/2013
Priority:	Standard	Application Received:	11/26/2013

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 & 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 57-year-old female with a reported date of injury on 04/03/2003. The injury was reportedly due to repetitive lifting. Her diagnoses were noted to include chronic pain syndrome, chronic median neuropathy, chronic cervical radiculopathy, and status post right thumb arthroplasty. Her previous treatments were noted to include chiropractic care, cortisone injections, surgery, physical therapy, stellate ganglion block, trigger point injections, and acupuncture. The progress note dated 10/23/2013 revealed the injured worker complained of increased hand pain and difficulty perceiving temperature. The physical examination revealed range of motion to flexion was 50 out of 50, extension 40 out of 60, right/left lateral flexion 20/40 degrees, left rotation 60/80 degrees, and right rotation was 75/80 degrees. The progress note dated 05/22/2014 revealed the injured worker reported her hands were unchanged. The physical examination revealed hands were cold to touch and there was limited wrist extension bilaterally and no specific trophic changes. The request for authorization dated 10/29/2013 was for a vocational rehab analysis due to the injured worker had not worked in years and analysis was needed to determine capacity to compete in an open labor market.

IMR ISSUES, DECISIONS AND RATIONALES

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

ONE CONSULTATION FOR VOCATIONAL REHAB ANALYSIS: 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.

Decision rationale: The injured worker has received previous physical therapy, acupuncture, and chiropractic care. 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. Not recommended for routine use as part of an occupational rehab or screening, or generic assessments in which the question is whether someone can do any type of job generally. Both job specific and comprehensive FCEs can be valuable tools in clinical decision making for the injured worker; however, FCE is an extremely complex and multifaceted process. Little is known about the reliability and validity of these tests and more research is needed. The Guidelines for performing an FCE is recommended prior to admission to a work-hardening program, with preference for assessment tailored to a specific task or job. If a worker is actively participating in determining the suitability of a particular job, the FCE is more likely to be successful. An 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. Consider an FCE if case management is hampered by complex issues such as prior unsuccessful return to work attempts, conflicting medical reporting on precautions and/or fitness for modified job, and injuries that require detailed exploration of a worker's abilities. The Guidelines state timing is appropriate, such as close or at maximum medical improvement/all key medical reports are secured and additional secondary conditions clarified. Do not proceed with an FCE if the sole purpose is to determine a worker's effort or compliance or if the worker has returned to work and an ergonomic assessment has not been arranged. There is a lack of documentation regarding a specific task or job with specific job requirements. There is a lack of documentation regarding possible admission to a work-hardening program. Therefore, the request for One Consultation For Vocational Rehab Analysis is not medically necessary.