

Case Number:	CM14-0003363		
Date Assigned:	01/31/2014	Date of Injury:	05/04/2011
Decision Date:	06/24/2014	UR Denial Date:	12/30/2013
Priority:	Standard	Application Received:	01/09/2014

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 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 a 55-year-old male who reported an injury on 05/04/2011 after lifting a heavy object that reportedly caused injury to his low back. The injured worker's treatment history included activity modifications, physical therapy, epidural steroid injections, and multiple medications. The injured worker underwent a comprehensive interdisciplinary evaluation on 12/11/2013 that documented that the injured worker was not a surgical candidate. The injured worker had exhausted lower levels of conservative care. It was noted that the injured worker had significant lumbar range of motion deficits with tenderness to palpation of the bilateral lumbar paraspinal musculature and decreased motor strength and decreased reflexes of the right ankle with dorsiflexion in the right great toe with extension. It was noted that the injured worker had diminished sensation in the right L5-S1 dermatomal distributions. It was documented that the injured worker was motivated to participate in a multidisciplinary program with a goal to wean the injured worker off Norco and alprazolam and become independent with activities of daily living. Psychologic testing revealed that the injured worker had a 48 on the Beck Depression Inventory, a scale that placed him in the severe category and a 35 on the Beck Anxiety Inventory that also placed him in the severe category. A request was made for a functional restoration program for 10 days. No justification for the request was provided.

IMR ISSUES, DECISIONS AND RATIONALES

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

FUNCTIONAL RESTORATION PROGRAM FOR TEN DAYS: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: CHRONIC PAIN MEDICAL TREATMENT GUIDELINES, CHRONIC PAIN PROGRAMS OR FUNCTIONAL RESTORATION PROGRAMS,

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Chronic Pain Programs (Functional Restoration Programs) Page(s): 30.

Decision rationale: The requested functional restoration program for 10 days is not medically necessary or appropriate. California Medical Treatment Utilization Schedule recommends functional restoration programs for injured workers who have physical deficits and are willing and motivated to change, that would appropriately be addressed by a multidisciplinary approach. The clinical documentation submitted for review does indicate that the injured worker has physical and emotional deficits that require a multidisciplinary approach; however, the request as it is submitted does not clearly identify the number of hours being requested. Therefore, the appropriateness of the request itself cannot be determined. As such, the requested functional restoration program for 10 days is not medically necessary or appropriate.