MAXIMUS Federal Services

Case Number:	CM14-0101829		
Date Assigned:	07/30/2014	Date of Injury:	01/21/2009
Decision Date:	10/02/2014	UR Denial Date:	06/12/2014
Priority:	Standard	Application Received:	07/01/2014

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 and Rehabilitation, and is licensed to practice in Nevada. 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 records presented for review indicate that this 48 year-old individual was reportedly injured on January 21, 2009. The mechanism of injury is not listed in these records reviewed. The most recent progress note, dated June 3, 2014, indicates that there are ongoing complaints of abdominal pain (it is reported that another provider is addressing the right knee and low back workers comp injury). The physical examination demonstrated a 5'2", 216 pound individual who is normotensive (110/68) who has no tenderness to palpation in the upper quadrant of the abdomen, morbid obesity (BMI is 39.51) and a full range of motion of all extremities. Diagnostic imaging studies were not reported. Previous treatment includes surgical intervention, multiple medications and pain management interventions. A request had been made for several laboratory studies and was not certified in the pre-authorization process on June 12, 2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Lipid Panel: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation http://www.cms.gov/medicare-coverage-database/details/ncd-details.aspx?NCDId=102&ncdver=2&NCAId=94&NcaName+Lipid National Coverage Determination (NCD) for Lipid Testing

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) pain chapter updated September, 2014

Decision rationale: While noting there are complaints of abdominal pain, the physical examination specifically notes the abdomen to be soft, not tender, no masses. The injured worker is indicating that the pain complaints are not physiologic. This is a morbidly obese individual who simply does not have any clinical indication for additional laboratory studies based on the physical examination reported. The American College of Occupational and Environmental Medicine (ACOEM) guidelines do not address such interventions. Therefore, based on the clinical information presented for review this is not medically necessary.

C-Reactive Protein Test: 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) pain chapter updated September, 2014

Decision rationale: While noting there are complaints of abdominal pain, the physical examination specifically notes the abdomen to be soft, not tender, no masses. The injured worker is normotensive indicating that the pain complaints are not physiologic. This is a morbidly obese individual who simply does not have any clinical indication for additional laboratory studies based on the physical examination reported. The American College of Occupational and Environmental Medicine (ACOEM) guidelines do not address such interventions. Therefore, based on the clinical information presented for review this is not medically necessary.

Complete Blood Count: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Centers for Medicare & Medicaid Services National Coverage Determinations (NCD) for Blood Counts

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) pain chapter updated September, 2014

Decision rationale: While noting that there are complaints of abdominal pain, the physical examination specifically notes the abdomen to be soft, not tender, no masses. The injured worker is indicating that the pain complaints are not physiologic. This is a morbidly obese individual who simply does not have any clinical indication for additional laboratory studies based on the physical examination reported. The American College of Occupational and

Environmental Medicine (ACOEM) guidelines do not address such interventions. Therefore, based on the clinical information presented for review this is not medically necessary.

Thyroid-Stimulating Hormone Levels Test: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation http://www.cms.gov/medicare-coverage-database/details/ned-details.aspx?NCDId=101&ncdver=1&CALId=138&CalName=Thyroid Centers for Medicare & medicaid Services National Coverage Determination (NCD) for Thyroid Testing

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) pain chapter updated September, 2014

Decision rationale: While noting there are complaints of abdominal pain, the physical examination specifically notes the abdomen to be soft, not tender, no masses. The injured worker is indicating that the pain complaints are not physiologic. This is a morbidly obese individual who simply does not have any clinical indication for additional laboratory studies based on the physical examination reported. The American College of Occupational and Environmental Medicine (ACOEM) guidelines do not address such interventions. Therefore, based on the clinical information presented for review this is not medically necessary.