MAXIMUS Federal Services

Case Number:	CM14-0119557		
Date Assigned:	10/17/2014	Date of Injury:	07/27/2012
Decision Date:	11/25/2014	UR Denial Date:	07/10/2014
Priority:	Standard	Application Received:	07/28/2014

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 Ophthalmology 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 patient is a 39 year-old male with the diagnosis of progressive myopia with peripheral retinal degeneration, vitreous detachments, history of penetrating keratoplasty in [redacted] with history of corneal graft rejection in both eyes and history of ocular hypertension in both eyes status post selective laser trabeculoplasty (SLT). Per evaluation dated 6/24/2014, the patient complains of new onset floater. Vision is stable at 20/125 in the right eye and 20/300 in the left eye. Retinal exam is significant for typical cystoid degeneration in both eyes, without any new retinal tears or detachments. Plan is to monitor and follow-up in 4 weeks. This is a review for the medical necessity of fundus photos times 8, optical coherence tomography times 8, ophthalmoscopy times 8, and B-scan ultrasound times 8.

IMR ISSUES, DECISIONS AND RATIONALES

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

Optical Coherence Tomography x8: 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 Other Medical Treatment Guideline or Medical Evidence: http://www.ncbi.nlm.nih.gov/pubmed/10163457 and Curr Opin Ophthalmol. 1996 Jun;7(3):33-8. Macular disease and optical coherence tomography. Coker JG1, Duker JS.

Decision rationale: One set of testing is indicated to evauate the patient's eye condition; based on the results of this testing, repeating the diagnositic imaging may or may not be indicated in the future. Usually, decision to perform additional testing is made on the subsequent follow-up visits.

Ophthalmoscopy x8: 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 Other Medical Treatment Guideline or Medical Evidence: http://www.ncbi.nlm.nih.gov/pubmed/24391370 Oman J Ophthalmol. 2013 Sep;6(Suppl 1):S32-5. doi: 10.4103/0974-620X.122292 Imaging of the peripheral retina. Kernt M, Kampik A.

Decision rationale: One set of testing is indicated to evauate the patient's eye condition; based on the results of this testing, repeating the diagnositic imaging may or may not be indicated in the future. Usually, decision to perform additional testing is made on the subsequent follow-up visits.

B-Scan Ultrasound x8: 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 Other Medical Treatment Guideline or Medical Evidence: Byrne SF, Green RL. Ultrasound of the Eye and Orbit. 2nd ed. St. Louis, Mo: Mosby Year Book; 2002

Decision rationale: One set of testing is indicated to evauate the patient's eye condition; based on the results of this testing, repeating the diagnositic imaging may or may not be indicated in the future. Usually, decision to perform additional testing is made on the subsequent follow-up visits.

Fundus Photos x8: 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 Other Medical Treatment Guideline or Medical Evidence: Saine PJ, Tyler ME. Ophthalmic Photography: Retinal Photography, Angiography, and Electronic Imaging. Boston: Butterworth-Heinemann; 2002

Decision rationale: One set of testing is indicated to evauate the patient's eye condition; based on the results of this testing, repeating the diagnositic imaging may or may not be indicated in the future. Usually, decision to perform additional testing is made on the subsequent follow-up visits.