MAXIMUS Federal Services

Case Number:	CM14-0156192		
Date Assigned:	09/25/2014	Date of Injury:	06/25/2011
Decision Date:	10/27/2014	UR Denial Date:	09/05/2014
Priority:	Standard	Application Received:	09/24/2014

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 Family Practice 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 52 year old male who sustained an industrial injury of 6/25/2011. He is status post left shoulder arthroscopy on 12/20/13. He is also diagnosed with lumbar sprain/strain with left lower extremity radiculitis, cervical sprain/strain with left upper extremity radiculitis, left elbow lateral epicondylitis, left wrist tendinitis, and history of left inguinal pain with increased symptoms. The patient was evaluated on 8/12/14 with chief complaint of low back pain with left lower extremity radiation. Examination revealed lumbar spasm and positive left straight leg raise (SLR), and decreased sensation of the left L5-S2 nerve root distribution on the left. Psychological ROS was positive for depression, stress and anxiety. Request is made for "Hepatic function panel due to long turn medication use and history of liver findings in order to obtain psychiatric medication (as per patient)". Norco was prescribed. It is noted that the patient had a psychiatric consultation and report is requested for review. UR dated 9/5/14 reviewed the 8/12/14 report and non-certified the request for hepatic function panel. The prior peer reviewer noted that the guidelines do not recommend hepatic dysfunction tests if there is no history of hepatic dysfunction. Per a psychiatric report dated 7/23/14, the patient is taking omeprazole, doxazosin, nifedipine, losartan, hydrocodone, nortriptyline and atorvastatin. A 9/2/14 noted that the patient has had increased aspartate aminotransferase (AST) and increased Alanine Aminotransferase (ALT). The patient is taking cholesterol medication, which may have increased AST and ALT. Norco was discontinued.

IMR ISSUES, DECISIONS AND RATIONALES

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

Hepatic Function Panel: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Washington State Agency Medical Directors' Group. Interagency guideline on opioid dosing for chronic non-cancer pain: an educational aid to improve care and safety with opioid treatment. Washington State Department of Labor and Industries, 2010. 55 p [123 references]

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines does not address hepatic function panel.. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence:
http://labtestsonline.org/understanding/analytes/liver-panel/tab/test

Decision rationale: References state that a liver panel may be used to screen for liver damage, especially if someone has a condition or is taking a drug that may affect the liver. Per a psychiatric report dated 7/23/14, the patient is taking omeprazole, doxazosin, nifedipine, losartan, hydrocodone, nortriptyline and atorvastatin. The use of these medications would support a hepatic function pane.