

Case Number:	CM14-0025713		
Date Assigned:	07/02/2014	Date of Injury:	05/03/2012
Decision Date:	08/12/2014	UR Denial Date:	02/19/2014
Priority:	Standard	Application Received:	02/28/2014

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 Family Medicine and is licensed to practice in North Carolina. 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 claimant had an original date of injury of 5/3/2012. He had myocardial infarction and was treated with a stent to the left anterior descending artery. He has hypertension and coronary artery disease. He is treated with oral medications. Medical reports state that he has good exercise capacity with no chest pain or shortness of breath. He has a thallium stress test on 10/14/2013 which showed no evidence of reversible perfusion impairment. The request is for another stress test (hemodynamic study).

IMR ISSUES, DECISIONS AND RATIONALES

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

HEMODYNAMIC STUDY: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.ncbi.nlm.nih.gov/pubmed/21732836>.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation 2011 ACCF/AHA/SCAI Guideline for percutaneous coronary artery intervention. A report of the American College of Cardiology Foundation/American Heart Association Task Force on Practice Guidelines and the Society for Cardiovascular Angiography and Interventions.

Decision rationale: A hemodynamic study, such as the stress test requested, may be indicated if there are significant changes in exercise capacity, shortness of breath or chest pain. The 2011 ACCF/AHA/SCAI Guidelines state that routine stress testing in the asymptomatic post-stent patient with stable coronary artery disease is not clinically indicated. In this case, the medical records clearly contain a normal stress test dated 10/14/13 and clearly document normal exercise capacity, no chest pain, and no shortness of breath. As such, a hemodynamic study, in this case a stress test, is not medically indicated because there are no active clinical symptoms. As such, the request is not medically necessary and appropriate.