

<b>Case Number:</b>	CM14-0028632		
<b>Date Assigned:</b>	06/16/2014	<b>Date of Injury:</b>	05/12/1995
<b>Decision Date:</b>	07/21/2014	<b>UR Denial Date:</b>	02/04/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/06/2014

### 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 Occupational Medicine 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 applicant has filed a claim for gastrointestinal distress, psychological stress, hypertension, diabetes, obstructive sleep apnea, shoulder pain, wrist pain, and elbow pain reportedly associated with cumulative at work first claimed on May 12, 1995. Thus far, the applicant has been treated with the following: analgesic medications, attorney representation; earlier lumbar fusion surgery; a spinal cord stimulator implantation; and extensive periods of time off of work. In a Utilization Review Report, dated February 4, 2014, the claims administrator denied a request for medical transportation to and from appointments. Non-MTUS Medicare Guidelines were cited, although the MTUS does address the topic. The applicant's attorney subsequently appealed, in a letter dated March 6, 2014, stating that the applicant's parents are no longer able to transport him to and from appointments. In a handwritten December 6, 2013 progress note, the applicant was placed off of work, on total temporary disability. The note was difficult to follow and not entirely legible. It appears that authorization for transportation to and from medical visits was sought via request for authorization form dated January 27, 2014. In a progress note of the same date, January 27, 2014, difficult to follow, not entirely legible, the applicant was described as having persistent complaints of low back pain. It was stated that the applicant did have an abdominal hernia. The applicant exhibited an antalgic gait requiring usage of a cane. Medical transportation was sought to and from medical visits. It was stated that the applicant did not drive secondary to pain complaints and/or concerns about medication usage. The applicant was placed off of work, on total temporary disability.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**TRANSPORTATION TO AND FROM MEDICAL VISITS:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation  
<http://www.medicare.gov/LongTermCare/static/CommunityServices.asp>.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 83.

**Decision rationale:** As noted in the MTUS-adopted ACOEM Guidelines, to achieve functional recovery, applicants must assume certain responsibilities, one of which is to keep scheduled appointments. Thus, the service being sought by the attending provider, namely transportation to and from medical appointments, is one which has been deemed by ACOEM to be a matter of applicant responsibility as opposed to a matter of payer responsibility. Therefore, the request for transportation to and from medical visits is not medically necessary.