MAXIMUS Federal Services

Case Number:	CM14-0035747		
Date Assigned:	06/23/2014	Date of Injury:	08/29/2013
Decision Date:	07/22/2014	UR Denial Date:	02/27/2014
Priority:	Standard	Application Received:	03/24/2014

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 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 is a [redacted] employee who has filed a claim for ankle pain reportedly associated with an industrial injury of August 29, 2013. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representation; unspecified amounts of physical therapy and manipulative therapy; transfer of care to and from various providers in various specialties; and reported return to regular work. In a utilization review report dated February 27, 2014, the claims administrator denied a request for a functional capacity testing involving the left ankle, citing non-MTUS Chapter 7 ACOEM Guidelines. In a progress note dated February 7, 2014, sparse, the applicant presented with persistent ankle pain. The applicant is asked to use shoe inserts to support his ankle. The applicant is asked to obtain a "final functional capacity evaluation (FCE)." The applicant was, somewhat incongruously, returned to regular duty work, however. An earlier note of January 10, 2014 was again notable for comments that the applicant should return to regular duty work while awaiting orthopedic and podiatry consultation.

IMR ISSUES, DECISIONS AND RATIONALES

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

Final Functional Capacity Evaluation of the Left Ankle: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Non-MTUS ACOEM Practice Guidelines, Chapter 7: Independent Medical Examinations and Consultations, pages 132-139.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 2 General Approach to Initial Assessment and Documentation Page(s): 21.

Decision rationale: While the MTUS-adopted ACOEM Guidelines in Chapter 2, page 21 do suggest considering a function capacity evaluation to help translate functional impairments into limitations and restrictions, in this case, however, the applicant has already returned to regular work, effectively obviating the need for the proposed FCE. No narrative rationale or commentary was attached to the request for authorization. It was unclear why FCE testing was being sought here, given the fact that the applicant has already successfully retuned to regular work. Therefore, the request is not medically necessary.