

Case Number:	CM14-0066979		
Date Assigned:	07/11/2014	Date of Injury:	07/05/2009
Decision Date:	11/24/2014	UR Denial Date:	04/14/2014
Priority:	Standard	Application Received:	05/12/2014

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 represented [REDACTED] employee who has filed a claim for chronic shoulder pain reportedly associated with an industrial injury of July 15, 2009. In a Utilization Review Report dated April 14, 2014, the claims administrator denied a request for an ENT consultation. Non-MTUS Chapter 7 ACOEM Guidelines were invoked in the denial. The claims administrator stated that the attending provider did not submit enough evidence to support the ENT consultation at issue. The applicant's attorney subsequently appealed. In a November 11, 2013 progress note, the applicant reported issues with tinnitus, hearing loss, eye irritation, head trauma, post concussion syndrome, neck pain, and sleep disturbance. Dietary supplements, including Sentra, were refilled. An ENT evaluation was sought to evaluate the applicant's allegations of left ear tinnitus. An ophthalmology consultation was also sought to evaluate the applicant's allegations of eye irritation. In an April 28, 2014 progress note, the applicant was placed off work, on total temporary disability. A Left Shoulder Arthroscopy was pending. The applicant was asked to continue topical compounded creams in the interim. 6/10 shoulder pain was noted. In a March 17, 2014 office visit, a Left Shoulder Arthroscopy, topical compounds, an ophthalmology consultation, and an ENT evaluation were sought. The applicant was again placed off work, on total temporary disability. The attending provider stated that ENT evaluation was being endorsed to evaluate the applicant's allegations of tinnitus.

IMR ISSUES, DECISIONS AND RATIONALES

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

ENT Consultation: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM- Chapter Independent Medical Examinations and Consultations, page 163

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 92.

Decision rationale: As noted in the MTUS-adopted ACOEM Guidelines in Chapter 5, page 92, referral may be appropriate when a practitioner is uncomfortable with treating a particular cause of delayed recovery. In this case, the applicant has alleged ongoing issues with hearing loss secondary to tinnitus. Obtaining a practitioner, who is qualified to perform an ENT consultation, such as a Specialist/Otolaryngologist, is therefore indicated. Therefore, the request is medically necessary.