

Case Number:	CM14-0192542		
Date Assigned:	12/02/2014	Date of Injury:	03/01/1994
Decision Date:	01/14/2015	UR Denial Date:	11/13/2014
Priority:	Standard	Application Received:	11/18/2014

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 Physical Medicine and Rehabilitation 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 72 year old male with date of injury 3/01/94. The treating physician report dated 8/07/14 indicates that the patient presents with a history of outlet urinary obstructive symptoms. The cystoscopy findings reveal the bladder with moderate trabeculation and no evidence of any new tumors. According to the utilization review report dated 11/13/14, prior treatment history includes x-rays, MRI, surgery, work restrictions, medications and physical therapy. The current diagnoses are: 1. Benign prostatic hypertrophy; 2. History of bladder tumor. The utilization review report dated 11/13/14 denied the request for cystoscopy every six months (quantity/duration unspecified) and retrospective cystoscopy (8/07/14) based on lack of supporting documentation.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective: Cystoscopy Qty: 1.00 (DOS: 08/07/14): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Workers\compensation final regulations, Medical treatment utilization schedule (MTUS) regulations, Title 8, California Code of Regulations, Sections 9792.20-9792.26. Filed with secretary of state June 18, 2009 - Effective July 18, 2009

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American Urological Association Online Guidelines, Chapter 1: The Management of Bladder Cancer: Diagnosis and Treatment, Follow-Up

Decision rationale: The patient presents with a history of outlet urinary obstructive symptoms and history of bladder tumor. The current request is for retrospective cystoscopy (DOS: 8/07/14). The treating physician states that there has been no evidence of recurrence. The MTUS and ODG guidelines do not address cystoscopy. The American Urological Association Guidelines state "Although a variety of different follow-up strategies have been advocated, the most common approach has included patient assessment every three months in the first two years after initial diagnosis followed by every six months for the subsequent two to three years, and then annually thereafter." In this case, the treating physician has not provided the documentation to establish initial staging, treatment to date or how many cystoscopies have been performed and whether the urologist is adhering to the American Urological Association standard of care. Recommendation is that the request is not medically necessary.

Cystoscopy (every 6 months) (quantity/duration unspecified) Qty: 1.00: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Workers\compensation final regulations, Medical treatment utilization schedule (MTUS) regulations, Title 8, California Code of Regulations, Sections 9792.20-9792.26. Filed with secretary of state June 18, 2009 - Effective July 18, 2009

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American Urological Association Online Guidelines, Chapter 1: The Management of Bladder Cancer: Diagnosis and Treatment, Follow-Up

Decision rationale: The patient presents with a history of outlet urinary obstructive symptoms and history of bladder tumor. The current request is for cystoscopy every six months (quantity/duration unspecified). The treating physician states that there has been no evidence of recurrence. The MTUS and ODG guidelines do not address cystoscopy. The American Urological Association Guidelines state "Although a variety of different follow-up strategies have been advocated, the most common approach has included patient assessment every three months in the first two years after initial diagnosis followed by every six months for the subsequent two to three years, and then annually thereafter." In this case, the treating physician has not provided the documentation to establish initial staging, treatment to date or how many cystoscopies have been performed and whether the urologist is adhering to the American Urological Association standard of care. The IW received his last surgery in August 2011. There were no office visit progress notes included besides the outpatient procedure notes. We are bound by the IMR system to only evaluate the requested procedure which is cystoscopy every 6 months for an unlimited duration. The requesting physician needed to request quantity and duration. Neither was provided to this reviewer. This current request, as stated, is outside of any guideline published. Recommendation is that the request is not medically necessary.

