

Case Number:	CM14-0203942		
Date Assigned:	01/28/2015	Date of Injury:	10/16/2003
Decision Date:	03/16/2015	UR Denial Date:	11/21/2014
Priority:	Standard	Application Received:	12/05/2014

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: California

Certification(s)/Specialty: Physical Medicine & Rehabilitation

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 injured worker is a 54-year-old male who reported an injury on 10/16/2003. The mechanism of injury was not provided. His diagnoses include a nonessential hypertension. Past treatment was noted to include medications and insulin. The injured worker was noted to have lab work done on 05/24/2013 and 04/16/2014. On 08/22/2014, it was noted the injured worker had no new complaints and feels good. It was indicated that his blood pressure was controlled with medications. Upon physical examination, it was noted his blood pressure was 120/76, his heart sounds were normal, and his lungs were clear. Medications were noted to include Ramipril 10 mg, Lipitor, Paxil and insulin. The treatment plan was noted to include medications. A request was received for T3 Free, Free Thyroxine, TSH, Venipuncture, BMP, Hepatic function panel, uric acid, GGTP, Serum Ferritin, Vitamin Documentation Hydroxy, Apolipoprotein A, Apolipoprotein B, Glyco Hemoglobin, CBC, Lipid Panel, Total T3, T3 Uptake, T4, Lipitor, and Paxil without a rationale. The request for authorization was signed on 11/07/2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

T3 Free: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Aetna Guidelines

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lab Tests Online (<http://labtestsonline.org/understanding/analytes/t3/tab/test>)

Decision rationale: The request for T3 Free is not medically necessary. According to Lab Tests Online, Free T3 is used to test thyroid function. The clinical documentation submitted for review did not indicate a rationale for the requested service nor that the injured workers previous laboratory results shown abnormal T3 level. Consequently, the request is not supported by the evidence-based guidelines. As such, the request for T3 Free is not medically necessary.

Free Thyroxine: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Aetna Guidelines

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lab Tests Online (<http://labtestsonline.org/understanding/analytes/t4/tab/test>)

Decision rationale: The request for Free Thyroxine is not medically necessary. According to Lab Tests Online, Free Thyroxine is used to help evaluate thyroid function. The clinical documentation submitted for review did not indicate a rationale for the requested service nor did it suggest abnormal lab values with the previous lab study. Consequently, the request is not supported. As such, the request for Free Thyroxine is not medically necessary.

TSH: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Aetna Guidelines

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lab Tests Online (<http://labtestsonline.org/understanding/analytes/tsh/tab/test>)

Decision rationale: The request for TSH is not medically necessary. According to Lab Tests Online, TSH is used to evaluate thyroid function. The clinical documentation submitted for review does not indicate a rationale for the requested service nor that the injured worker had abnormal lab values from the previous lab study in regard to TSH. Consequently, the request is not supported. As such, the request for TSH is not medically necessary.

Venipuncture: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation National Library of Medicine MedLinePlus Database (<http://www.nlm.nih.gov/medlineplus/ency/article/003423.htm>)

Decision rationale: The request for Venipuncture is not medically necessary. According to MedLinePlus, Venipuncture is collection of blood from a vein for laboratory testing. The clinical documentation submitted for review did not indicate a rationale for any of the requested laboratory services. Consequently, this request is not supported. As such, the request for Venipuncture is not medically necessary.

BMP: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lab Tests Online (<http://labtestsonline.org/understanding/analytes/bmp/tab/glance>)

Decision rationale: The request for BMP is not medically necessary. According to Lab Tests Online, a basic metabolic panel (BMP) can give a healthcare provider information regarding kidney function, electrolytes, acid/base balance, and level of blood glucose. The clinical documentation submitted for review did not indicate a rationale for the requested service. Consequently, the request is not supported by the evidence-based guidelines. As such, the request for BMP is not medically necessary.

Hepatic Function Panel: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lab Tests Online (<http://labtestsonline.org/understanding/analytes/liver-panel/tab/test>)

Decision rationale: The request for Hepatic function panel is not medically necessary. According to Lab Tests Online, liver panel may be used to screen for liver damage. The clinical documentation submitted for review did not indicate a rationale for the requested laboratory service though the previous study indicated the injured worker had elevated levels of ALT. Consequently, the request is not supported by the evidence-based guidelines. As such, the request for Hepatic function panel is not medically necessary.

Uric Acid: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lab Tests Online (<http://labtestsonline.org/understanding/analytes/uric-acid/tab/test>)

Decision rationale: The request for Uric acid is not medically necessary. According to Lab Tests Online, uric acid blood test is used to detect high levels of the compound in the blood in order to help diagnose gout. The clinical documentation submitted for review did not indicate a rationale for the requested service nor that the injured worker had abnormal lab values in the previous study. Consequently, the request is not supported. As such, the request for Uric acid is not medically necessary.

GGTP: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lab Tests Online (<http://labtestsonline.org/understanding/analytes/ggt/tab/test>)

Decision rationale: The request for GGTP is not medically necessary. According to Lab Tests Online, this test is used to determine the cause of the elevated alkaline phosphatase (ALP). The clinical documentation submitted for review did not indicate a rationale for the requested laboratory service nor was it notated on the previous laboratory study that the injured worker had elevated ALP levels. Consequently, the request is not supported by the evidence-based guidelines. As such, the request for GGTP is not medically necessary.

Serum Ferritin: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Aetna Guidelines

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lab Tests Online (<http://labtestsonline.org/understanding/analytes/ferritin/tab/test>)

Decision rationale: The request for Serum Ferritin is not medically necessary. According to Lab Tests Online, Ferritin may be needed when a CBC shows a person's hemoglobin and hematocrit are low. The clinical documentation submitted for review did not indicate a rationale for the requested service nor was it indicated on previous laboratory results that the injured worker had decreased hematocrit and hemoglobin levels. Consequently, the request is not supported. As such, the request for Serum Ferritin is not medically necessary.

Vitamin D Hydroxy: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lab Tests Online (<http://labtestsonline.org/understanding/analytes/vitamin-d/tab/test>)

Decision rationale: The request for Vitamin D Hydroxy is not medically necessary. According to Lab Tests Online, Vitamin D test is used to determine if bone weakness, bone malformation, or abnormal metabolism of the calcium is occurring. The clinical documentation submitted for review did not indicate a rationale for the requested service. It was indicated that injured worker had decreased Vitamin Documentation levels; however, these levels were not significantly low. Consequently, the request is not supported. As such, the request for Vitamin Documentation Hydroxy is not medically necessary.

Apolipoprotein A: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lab Tests Online (<http://labtestsonline.org/understanding/analytes/apoa/tab/test>)

Decision rationale: The request for Apolipoprotein A is not medically necessary. According to Lab Tests Online, this test may be ordered as part of a profile to help determine a person's risk for developing cardiovascular disease. The clinical documentation submitted for review did not indicate a rationale for the requested service. It was also not indicated that the injured worker had abnormal lab values in regard to this draw. Consequently, the request is not supported. As such, the request for Apolipoprotein A is not medically necessary.

Apolipoprotein B: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lab Tests Online (<http://labtestsonline.org/understanding/analytes/apob/tab/test>)

Decision rationale: The request for Apolipoprotein B is not medically necessary. According to Lab Tests Online, this test is used to help determine the risk for developing cardiovascular disease. The clinical documentation submitted for review indicated the injured worker had low

levels of APOB; however, there was no rationale regarding the request. Consequently, the request is not supported. As such, the request is not medically necessary.

Glycohemoglobin: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Aetna Guidelines

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation National Center for Biotechnology Information PubMed Database (www.ncbi.nlm.nih.gov/pubmed/11427445)

Decision rationale: The request for Glycohemoglobin is not medically necessary. According to the National Institute of Health, glyco hemoglobin is the indicator for glycemic control in diabetic patients. The clinical documentation submitted for review did not indicate a rationale for the requested service. Consequently, the request is not supported. As such, the request for Glyco Hemoglobin is not medically necessary.

CBC: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lab Tests Online (<http://labtestsonline.org/understanding/analytes/cbc/tab/test>)

Decision rationale: The request for CBC is not medically necessary. According to Lab Tests Online, a complete blood count (CBC) is used to determine an individual's general health status. The clinical documentation submitted for review did not indicate a rationale for the requested service nor a rationale regarding why the injured worker needed lab tests done often. Consequently, the request is not supported. As such, the request for CBC is not medically necessary.

Lipid Panel: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Lab Tests Online (<http://labtestsonline.org/understanding/analytes/lipid/tab/glance>)

Decision rationale: The request for Lipid Panel is not medically necessary. According to Lab Tests Online, a lipid profile is used as part of a cardiac risk assessment to help determine a patient's risk for heart disease. The clinical documentation submitted for review did not indicate

a rationale for the requested service nor that the injured workers previous lipid panel was abnormal. Consequently, the request is not supported. As such, the request for Lipid Panel is not medically necessary.