

Case Number:	CM15-0143331		
Date Assigned:	08/04/2015	Date of Injury:	07/25/2006
Decision Date:	09/09/2015	UR Denial Date:	06/30/2015
Priority:	Standard	Application Received:	07/23/2015

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: Illinois

Certification(s)/Specialty: Ophthalmology

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 51 year-old female who sustained an industrial injury on 07-25-06. Initial diagnoses are not available. Current diagnoses include unspecified essential hypertension. Diagnostic testing and treatment to date has included radiographic imaging, spinal surgery, physical therapy, treatment for gastrointestinal disorders, hypertension, depression, and diabetes. Currently, the injured worker reports improved hypertension. Physical examination is remarkable for elevated blood pressure; blood glucose levels had been within target range 45.3% of the time. Requested treatments include ophthalmology consultation. The injured worker's status is not addressed. Date of Utilization Review: 06-30-15.

IMR ISSUES, DECISIONS AND RATIONALES

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

Ophthalmology Consultation: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM 2nd Edition, 2004 page 127.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American Academy of Ophthalmology Preferred Practice Pattern.

Decision rationale: This is a patient with diabetes where the physician (non-ophthalmologist) was not able to adequately visualize the fundus on exam. An eye exam is recommended at least once a year in a diabetic patient. Although the patient's last exam is not documented, one must presume that it was not completed recently and therefore the standard of care in such cases would be to request ophthalmology consult to check for diabetic ocular complications. Therefore, an ophthalmology consult is medically necessary in this patient.