

Case Number:	CM15-0165666		
Date Assigned:	09/03/2015	Date of Injury:	10/09/2008
Decision Date:	10/09/2015	UR Denial Date:	08/13/2015
Priority:	Standard	Application Received:	08/24/2015

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: Texas, New York, California
 Certification(s)/Specialty: Preventive Medicine, Occupational Medicine

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 65-year-old who has filed a claim for depression, irritable bowel syndrome, diabetes mellitus, and gastroesophageal reflux disease reportedly associated with an industrial injury of October 9, 2008. In a Utilization Review report dated August 13, 2015, the claims administrator failed to approve a request for a body composition study. The claims administrator referenced a July 28, 2015 office visit in its determination. The applicant's attorney subsequently appealed. On September 9, 2015, the applicant was placed off of work, on total temporary disability. The applicant presented with unchanged symptoms of reflux, sleep disturbance, blurred vision, and constipation, it was reported. The applicant was asked to obtain a 24-hour Holter monitor study and an echocardiogram. Laboratory testing was endorsed. The applicant's medications included benazepril, Prilosec, Gaviscon, Lopid, Crestor, metformin, glipizide, and aspirin, it was reported. On July 28, 2015, the applicant was again placed off of work, on total temporary disability. An AccuChek blood glucose test and a body composition study were performed in the clinic, the results of which were not detailed. A 24-hour Holter monitor study, EKG, echocardiogram, and stress echocardiogram were all endorsed. The applicant stood 5 feet 5 inches tall and weighed 154 pounds, it was reported.

IMR ISSUES, DECISIONS AND RATIONALES

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

Body composition study: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation www.ncbi.nlm.nih.gov.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Amended 2014 (Resolution 39) ACR-SPR-SSR PRACTICE PARAMETER FOR THE PERFORMANCE OF DUAL-ENERGY X-RAY ABSORPTIOMETRY (DXA)It may also be used to measure whole-body composition [7-9]. BMD measurement is indicated whenever a clinical decision is likely to be directly influenced by the result of the test [11].

Decision rationale: No, the request for a body composition study was not medically necessary, medically appropriate, or indicated here. The MTUS does not address the topic. The request was ambiguously ordered. It was not clear precisely what the study represented. The study appeared to represent a request for a dual-energy x-ray absorptiometry (DEXA), a means of measuring bone mineral density. While the American College of Radiology (ACR) does acknowledge that DEXA bone scanning can be employed to measure whole body composition, the ACR qualifies its position by noting that such testing is indicated whenever clinical decision is likely to be directly influenced by the results of the test. Here, however, the attending provider did not state how (or if) the test results would have influenced or alter the treatment plan. The attending provider did not state how the proposed body composition study/DEXA body composition analysis/DEXA scan would have influenced or altered the treatment plan. Therefore, the request was not medically necessary.