

Case Number:	CM15-0028653		
Date Assigned:	02/20/2015	Date of Injury:	11/01/2011
Decision Date:	04/03/2015	UR Denial Date:	02/12/2015
Priority:	Standard	Application Received:	02/17/2015

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: Florida, New York, Pennsylvania
Certification(s)/Specialty: Family Practice

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 47 year old female who sustained an industrial injury on 11/1/11. The injured worker reported symptoms in the back. The diagnoses included lumbar facet arthropathy L4-L5 and l5-S1 right side, status post rhizotomy L4-L5 and l5-S1 right side on 12/29/14, right sided sacroiliac joint arthropathy. Treatments to date include facet joint radiofrequency ablation on 12/29/14, oral pain medications, and activity modification. In a progress note dated 1/13/15 the treating provider reports the injured worker was with a chief complaint of "back pain" noting "no significant tenderness in the lumbar region." On 2/12/15 Utilization Review non-certified the request for Functional Capacity Evaluation. The MTUS, ACOEM Guidelines, (or ODG) was cited.

IMR ISSUES, DECISIONS AND RATIONALES

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

Functional Capacity Evaluation: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 48. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG)-TWC Fitness for Duty Procedure Summary (updated 03.26.2014), Guidelines for performing an FCE.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 89, 90.

Decision rationale: The PTP makes the case that the request for a Final FCE to facilitate the declaration of the patient's status of Permanent and Stationary translating medical impairment in to functional limitations to determine work capability. The PTP's description of the varied duties of the Injured Worker as a [REDACTED] appear fairly comprehensive. It was the PTP's contention that the anticipated decision was that the member would be declared P&S at the next visit and the FCE was critical to fulfilling the requirement of the PR-4. Per the ACOEM the first step in managing delayed recovery is to document the patient's current state of functional ability (including activities of daily living) and the recovery trajectory to date as a time line. As a starting point for the assessment, obtain a complete history from the patient and other objective observers, including the employer or onsite occupational health professional, with regard to abilities and effectiveness at work. Goals for functional recovery can then be framed with reference to this baseline. A number of functional assessment tools are available, including functional capacity exams and videotapes. Most assess general functioning, but modifications to test work-related functioning are possible. The FCE was clearly positioned as a critical element in the next step for declaration of P&S status for this Injured Worker with a DOI of 11/1/11. Therefore, I disagree with the UR Non-Cert and would approve the request for the FCE.