

Case Number:	CM15-0043309		
Date Assigned:	03/13/2015	Date of Injury:	01/12/1996
Decision Date:	05/01/2015	UR Denial Date:	02/18/2015
Priority:	Standard	Application Received:	03/06/2015

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: 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 injured worker is a 54 year old male, who sustained an industrial injury from prolonged exposure to Beryllium loading and unloading dyes on 1/12/96. The diagnoses have included chronic beryllium disease due to toxic exposure, obesity, depression, shortness of breath, back pain and sleep apnea. Treatment to date has included medications, diagnostics, nebulizer treatments, and psychiatry. Currently, as per the physician progress note dated 12/5/14, the injured worker complains of ongoing problems with shortness of breath, cough and phlegm. The other noted problems included obesity, osteopenia, depression, chronic back pain, sleep apnea and hypertension. Pulmonary function test done on 7/29/14 revealed chronic bronchitis and asthma, mild restrictive lung disease, significant reversible airway disease, severely depressed diffusing capacity. This was consistent with loss of capillary bed, possible interstitial process, low cardiac output state or pulmonary vascular disease. The pulmonary function test dated 10/22/14 revealed that it was worse with restriction and severe obstruction. It was noted that the injured worker was suffering and something needed to be done. The physician had requested referral back to [REDACTED] for re-evaluation. He also noted that he will request a Computed Tomography (CT) scan of the chest to see if the Beryllium disease has progressed. The Computed Tomography (CT) scan of the lung dated 1/7/15 revealed diffuse nodules with areas of scarring in the upper lobes consistent with history of beryllium related lung disease and calcified mediastinal and hilar lymph nodes. The current medications included Advil, Zolof, Multivitamins, Vitamin D3, Boniva, Flovent inhaler, Lisinopril, Prednisone, Hydrochlorothiazide, Folic acid and Albuterol sulfate inhalation nebulizer solution. The physician requested treatment included Beryllium Testing.

IMR ISSUES, DECISIONS AND RATIONALES

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

Beryllium Testing: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG).

MAXIMUS guideline: Decision based on MTUS ACOEM Page(s): Chapter 7, Independent Medical Examinations and Consultations, Page 127.

Decision rationale: According to the MTUS, a consultation is ordered to aid in the diagnosis, prognosis, therapeutic management, determination of medical stability, and permanent residual loss and/or the examinee's fitness for return to work. A consult is usually asked to act in an advisory capacity, but may sometimes take full responsibility for investigation and/or treatment of an examinee or patient. The patient is scheduled to see a specialist to evaluate a possible worsening of his disease and it is the specialists responsibility to order specialty tests. At the time it was ordered, Beryllium Testing is not medically necessary.