

<b>Case Number:</b>	CM15-0068311		
<b>Date Assigned:</b>	04/15/2015	<b>Date of Injury:</b>	09/07/2014
<b>Decision Date:</b>	05/19/2015	<b>UR Denial Date:</b>	03/12/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	04/10/2015

### 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: 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 37 year old male, who sustained an industrial injury on 9/07/2014. He reported hitting a support beam while operating a forklift, hitting his face somewhere on the forklift. He was not wearing a helmet and his glasses fell off during the impact, and he could not see without his glasses. The injured worker was diagnosed as having incipient senile cataract, keratoconjunctivitis sicca, not specified as sjogren's, and pinguecula. Treatment to date has included physical therapy, visual testing, and medications. Currently, the injured worker complains of light sensitivity (since the time of injury), nausea when wearing glasses or with eye movement, occasional double vision, discharge, and memory loss. The eyeball was documented as healthy. The treatment plan included optometry referral for prescription glasses.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**1 Referral to an optometrist:** Overturned

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

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM page 127, chapter 7, referral to an optometrist.

**Decision rationale:** Based on the 11/25/14 progress report provided by treating physician, the patient presents with neck pain that extends to right shoulder and headaches. Per 02/18/15 progress report provided by ophthalmologist, the patient is status post blunt head trauma, and presents with extreme sensitivity to light, nausea when wearing glasses, occasional double visual acuity, and nausea with eye movement, discharge and memory loss. The request is for 1 referral to an optometrist. No RFA provided. Patient's diagnosis on 02/18/15 included incipient cataract, K-Sicca, and Pinguecula. On 02/18/15 examination findings, the ophthalmologist documented "eyeball is healthy and the problem is likely the brain processing center." Treatment to date has included physical therapy, visual testing, and medications. Patient last worked 09/07/14, per 11/25/14 treater report. ACOEM page 127 states, "Occupational health practitioner may refer to other specialists if the diagnosis is uncertain or extremely complex. When psychosocial factors are present or when the plan or course of care may benefit from additional expertise." Labor Code 9792.6 under utilization review definition states, "Utilization review does not include determinations of the work-relatedness of injury or disease." Treater has not provided reason for the request. UR letter dated 03/12/15 states "...the claimant has a refractive error and correction of refractive errors is not medically necessary and is generally for the convenience of the claimant and/or provider." The requesting physician is an ophthalmologist and has requested referral to optometrist. Patient may benefit from consult with optometrist to examine current eyeglass prescription. Given the patient's diagnosis and continued symptoms when wearing glasses, the request appears reasonable and in accordance with guidelines. Therefore, the request is medically necessary.