

MAXIMUS FEDERAL SERVICES, INC.

Independent Medical Review
P.O. Box 138009
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Notice of Independent Medical Review Determination

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

- 1) MAXIMUS Federal Services, Inc. has determined the extended functional evaluation requested **is not medically necessary and appropriate.**

INDEPENDENT MEDICAL REVIEW DECISION AND RATIONALE

An application for Independent Medical Review was filed on 5/13/2013 disputing the Utilization Review Denial dated 4/29/2013. A Notice of Assignment and Request for Information was provided to the above parties on 5/16/2013. A decision has been made for each of the treatment and/or services that were in dispute:

- 1) MAXIMUS Federal Services, Inc. has determined the extended functional evaluation requested **is not medically necessary and appropriate.**

Medical Qualifications of the Professional Reviewer:

The Professional Reviewer who made the decision has no affiliation with the employer, employee, providers or the claims administrator. The Professional Reviewer is a licensed Doctor of Chiropractic and is licensed to practice in California. 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 Professional 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 treatments and/or services at issue.

Case Summary:

Disclaimer: The following case summary was taken directly from the utilization review denial/modification dated April 29, 2013.

“This is a 41 year old male with a work injury to his low back and abdomen on 2/14/13. He was knocked over by a forklift. He was seen initially by a chiropractor who was certified for 6 visits. This provider has also requested for functional measurements to evaluate progress.”

Documents Reviewed for Determination:

The following relevant documents received from the interested parties and the documents provided with the application were reviewed and considered. These documents included:

- Application for Independent Medical Review
- Utilization Review by [REDACTED] (dated 4/29/2013)
- Authorization Letter from [REDACTED] (dated 3/19/2013)
- Employee’s Medical Records by [REDACTED] (dated 2/19/2013 through 5/6/2013)
- Employee’s Progress Note by [REDACTED] (dated 2/21/2013)
- Official Disability Guidelines (ODG) – Fitness for Duty Chapter; Functional Capacity Evaluation Section
- Chronic Pain Medical Treatment Guidelines (2009) – Page 48

1) Regarding the request for extended functional evaluation:

Medical Treatment Guideline(s) Relied Upon by the Professional Reviewer to Make His/Her Decision:

The Claims Administrator based its decision on the Official Disability Guidelines (ODG) – Fitness for Duty Chapter; Functional Capacity Evaluation Section, which is not part of the California Medical Treatment Utilization Schedule (MTUS). The provider based his/her decision on the Chronic Pain Medical Treatment Guidelines (2009) – Page 48, which is part of the MTUS. The Professional Reviewer found that the Chronic Pain Medical Treatment Guidelines section cited by the provider discusses “functional improvement measures” in general terms but does not include criteria for determining when a functional evaluation is medically necessary. The ODG section cited by the Claims Administrator includes criteria for determining when a functional evaluation is medically necessary. The Professional Reviewer found the guidelines used by the Claims Administrator more relevant and appropriate for the employee’s clinical circumstance.

Rationale for the Decision:

The employee had an injury to his low back and abdomen. He was initially seen by a chiropractor for 6 visits and a request was made for an extended functional evaluation. The American College of Occupational and Environmental Medicine (ACOEM) guidelines, 2004, 2nd Edition and Chronic Pain Medical Treatment Guidelines, which are part of the MTUS, discuss functional evaluations in general terms, but do not list criteria for determining when they are medically necessary. The ODG, which is not part of the MTUS, is more applicable to the employee’s condition and includes criteria for determining medical necessity. The ODG indicates that an employee must be close to or at maximum medical improvement (MMI) before performing an extended functional evaluation. The employee’s medical records received and reviewed do not show that the employee had reached MMI. The extended functional evaluation is not medically necessary and appropriate.

Effect of the Decision:

The determination of MAXIMUS Federal Services and its physician reviewer is deemed to be the final determination of the Administrative Director, Division of Workers' Compensation. With respect to the medical necessity of the treatment in dispute, this determination is binding on all parties.

In accordance with California Labor Code Section 4610.6(h), a determination of the administrative director may be reviewed only if a verified appeal is filed with the appeals board for hearing and served on all interested parties within 30 days of the date of mailing of the determination to the employee or the employer. The determination of the administrative director shall be presumed to be correct and shall be set aside only upon proof by clear and convincing evidence of one or more of the grounds for appeal listed in Labor Code Section 4610.6(h)(1) through (5).

Sincerely;

Richard C. Weiss, MD, MPH, MMM, PMP
Medical Director

cc: Department of Industrial Relations
Division of Workers' Compensation
1515 Clay Street, 18th Floor
Oakland, CA 94612

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Disclaimer: MAXIMUS is providing an independent review service under contract with the California Department of Industrial Relations. MAXIMUS is not engaged in the practice of law or medicine. Decisions about the use or nonuse of health care services and treatments are the sole responsibility of the patient and the patient's physician. MAXIMUS is not liable for any consequences arising from these decisions.