

Case Number:	CM14-0141078		
Date Assigned:	09/10/2014	Date of Injury:	02/16/1975
Decision Date:	10/20/2014	UR Denial Date:	08/04/2014
Priority:	Standard	Application Received:	09/02/2014

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. The expert reviewer is Board Certified in Family Practice and is licensed to practice in Arizona. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

Patient is a 67 year old male with a date of injury on 2/16/1975. The patient has the diagnosis of hypertension. Submitted documentation shows blood pressure at 153/97 and a heart rate of 68 on 1/28/2011. No further documentation was included in the submitted records.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective request for 1 ENDO-PAT 2000, DOS 01/28/2011: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3143035/> Assessing Endothelial Function with the Endo-Pat 2000.

Decision rationale: CA MTUS, the ODG, and the National Guideline Clearinghouse did not provide guidelines to support the use of the Endo-Pat 2000 for the management of hypertension. Alternative information states that endothelial dysfunction is one of the earliest events in the pathophysiological process leading to these atherosclerotic disorders. Furthermore, endothelial dysfunction contributes to the progression of disease by facilitating inflammation and

thrombosis. The traditional cardiovascular risk factors are associated with endothelial vasodilator dysfunction. The Endo-Pat 2000 is intended to check the functioning of the endothelium and the health of the arteries. Submitted documentation does not provide sufficient information in regards to this patient's health history or rationale for this procedure or how it would affect ongoing management. Therefore, the medical necessity of the Endo-Pat 2000 test is not established.