

Case Number:	CM13-0022954		
Date Assigned:	11/15/2013	Date of Injury:	10/10/2011
Decision Date:	01/09/2014	UR Denial Date:	08/10/2013
Priority:	Standard	Application Received:	09/11/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Occupational Medicine 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 physician 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:

In a utilization review report of October 25, 2013, the claims administrator denied a request for postoperative recliner and certified the request for home health aide for two weeks. Home health aide for three weeks, however, was denied. The applicant's attorney later appealed, on October 30, 2013. In a progress note of October 22, 2013, the applicant's surgeon writes that the lack of a postoperative recliner and home health services will doom the surgery. Therefore, the surgery has been postponed. The applicant is placed off of work, on total temporary disability, and asked to use medications as needed. Another note of August 20, 2013 is also notable for comments that the applicant needs postoperative home health care, transportation, and a recliner

IMR ISSUES, DECISIONS AND RATIONALES

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

Home Health Aide for four hours a day, three times a week: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Home health Services Page(s): 51.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Home Health Services Page(s): 51.

Decision rationale: The Physician Reviewer's decision rationale: The MTUS Chronic Pain Medical Treatment Guidelines are specifically not covered when this is the only service being

sought. The attending provider writes that he intends for the home health services to be furnished for the purposes of providing the employee with assistance in terms of non-medical activities of daily living such as cooking, cleaning, bathing, dressing, etc. In this case, it is not clearly stated what other concurrent medical treatments the employee would be receiving, such as home physical therapy, wound care, etc. Provision of stand-alone homemaker services is not recommended, per page 51 of the MTUS Chronic Pain Medical Treatment Guidelines. The request for a home Health Aide for four hours a day, three times a week is not medically necessary and appropriate.

A Recliner temporarily for post-operative use: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Centers for Medicare and Medicaid Services (CMS), Durable Medical Equipment..

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Rehabilitation for the Postsurgical Orthopedic Patient, Third Edition, 2013, edited by Lisa Maxey and Jim Magnusson, pg. 79..

Decision rationale: The Physician Reviewer's decision rationale: The MTUS does not specifically address the topic. As noted in the textbook Rehabilitation for the Postsurgical Orthopedic Candidate, the author suggests sleeping semi-reclined in a recliner chair during the immediate postoperative window. In this case, temporary usage of a recliner chair postoperatively would facilitate the employee's sleep postoperatively. The request for a recliner for temporarily postoperative use is medically necessary and appropriate.