

Case Number:	CM13-0056932		
Date Assigned:	12/30/2013	Date of Injury:	05/23/2012
Decision Date:	04/04/2014	UR Denial Date:	10/25/2013
Priority:	Standard	Application Received:	11/25/2013

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 Family Practice, 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:

The patient is a 41-year-old female who reported an injury on 05/23/2012. The mechanism of injury was noted to be the patient dropped an EKG tape from a machine and the roll of tape fell onto the floor and rolled into the back of the couch. The patient was attempting to get the tape, struck her head in the right parietal area, and jammed her chin on the back of the couch. The clinical documentation indicated the patient had increased problems with memory and was having episodes of passing out and falling. The patient was noted to have 4 episodes of the loss of bladder control and 2 of bowel control. The physician documented that the patient needed in home assistance for the management of the patient's safety, and for supervision to prevent falls. There was a letter from the spouse of the patient indicating the patient needed help remembering to take her medications and with activities of daily living, cooking, and personal care items. The patient's diagnoses are noted to include chronic low back pain, degenerative disc disease of the lumbar spine, right sciatica, bilateral hip pain, thoracolumbar scoliosis, a compression fracture of the L2 vertebra, concussion with no loss of consciousness, and a cognitive disorder traumatic brain injury, mood disorder, and post concussion headaches.

IMR ISSUES, DECISIONS AND RATIONALES

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

Home assistance 6 hours a day, Monday through Friday for 3 months: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Home Health Services Page(s): 51. Decision based on Non-MTUS Citation Official Disability

Guidelines (ODG), Low Back Chapter &
<http://www.medicare.gov/Publications/Pubs/pdf/10969.pdf>.

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

Decision rationale: The MTUS guidelines indicate home health services are recommended only for patients who are homebound and who are in need of part time or "intermittent" medical treatment of up to 35 hours per week. Medical treatment does not include homemaker services like shopping, cleaning, and laundry, and personal care given by home health aides like bathing, dressing, and using the bathroom when this is the only care needed. The spouse of the employee indicated that they previously had a friend living with them that was helping but could no longer be of assistance. However, there was a lack of documentation indicating the employee was in need of medical treatment intermittently and that the employee was homebound. There was a lack of documentation indicating the employee had a necessity for services other than homemaker or home health aide services. Given the above, the request for in home assistance 6 hours a day, Monday through Friday for 3 months is not medically necessary.