

Case Number:	CM14-0002970		
Date Assigned:	01/29/2014	Date of Injury:	12/23/2002
Decision Date:	06/19/2014	UR Denial Date:	12/13/2013
Priority:	Standard	Application Received:	01/08/2014

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 Orthopedic Surgery, and is licensed to practice in Texas. 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:

The injured worker is a 62-year-old whose date of injury is December 23, 2002. On this date the injured slipped and fell in a patient's closet. Treatment to date includes spine surgery (L4-5) anterior decompression and fusion on October 26, 2011, epidural steroid injections, facet injections, physical therapy and medication management. Follow up note dated December 5, 2013 indicates that the injured was recommended to undergo decompression at L4-5 with non-instrumented fusion. Note dated December 2, 2013 indicates that the injured will need in-home care for bathing, cooking and cleaning six hours per day for 60 days postoperatively. Note dated December 26, 2013 indicates that the injured was scheduled for surgery, but was found to have an irregular heart rate. Note dated January 23, 2014 indicates that the patient continues to await test results and has not been cleared for surgery.

IMR ISSUES, DECISIONS AND RATIONALES

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

HOME HEALTH AIDE 4-6 HOURS PER DAY 4 DAYS FOR 2 WEEKS QTY: 60 DAYS:
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 MTUS: CHRONIC PAIN MEDICAL TREATMENT GUIDELINES , HOME HEALTH SERVICES, 51

Decision rationale: Based on the clinical information provided, the request for home health aide 4-6 hours per day 4 days for 2 weeks qty: 60 days is not recommended as medically necessary. The submitted records indicate that the patient has been recommended for lumbar surgery; however, there is no indication that the patient has been cleared for surgery or that surgery has been performed to date. The submitted records fail to establish that the patient is homebound on a part-time or intermittent basis, as required by California Medical Treatment Utilization Schedule (CA MTUS) guidelines. Additionally, it is noted that home health aide is needed for bathing, cooking and cleaning. The request for a home health aide four to six hours each day, four days weekly, for two weeks, sixty days, is not medically necessary or appropriate.

HOME HEALTH RN EVALUATION: 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 MTUS: CHRONIC PAIN MEDICAL TREATMENT GUIDELINES , HOME HEALTH SERVICES, 51

Decision rationale: The submitted records indicate that the patient has been recommended for lumbar surgery; however, there is no indication that the patient has been cleared for surgery or that surgery has been performed to date. The request for an home health nurse evaluation is not medically necessary or appropriate.