

Case Number:	CM14-0007340		
Date Assigned:	02/10/2014	Date of Injury:	10/01/1997
Decision Date:	07/14/2014	UR Denial Date:	01/14/2014
Priority:	Standard	Application Received:	01/20/2014

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 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 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 who has submitted a claim for lumbar facet arthropathy, reflex sympathetic dystrophy, right knee internal derangement, chondromalacia patella, and piriformis syndrome associated with an industrial injury date of October 1, 1997. Medical records from 2013 - 2014 were reviewed. Patient complained of back pain radiating to bilateral lower extremities, graded 8/10 in severity. The patient had difficulty walking and sitting. Foot drop was present. Range of motion was limited. Muscle spasm was present at the low back area. She was bent forward in her wheelchair. Treatment to date has included implantable programmable pain pump, physical therapy, and medications such as Zoloft, Soma, Xanax, Neurontin, Senokot, Norco, Lidoderm, Lyrica, and Nuvigil. Utilization review from January 15, 2014 denied the request for home health aide, 24 hours per day, seven days per week, for twelve weeks because there was no documentation that the patient required medical treatment in the form of home health care.

IMR ISSUES, DECISIONS AND RATIONALES

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

HOME HEALTH AIDE X 24 HOURS PER DAY X 7 DAYS PER WEEK FOR 12 WEEKS: Upheld

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

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

Decision rationale: According to the Chronic Pain Medical Treatment Guidelines, home health services are only recommended for otherwise recommended medical treatment for patients who are homebound, generally up to no more than 35 hours per week. Medical treatment does not include homemaker services like shopping, cleaning, laundry, and personal care given by home health aides like bathing, dressing, and using the bathroom when this is the only care needed. In this case, patient was unable to care for herself as she needed home nursing care 24/7 since July 2013. Functional assessment performed in October 23, 2013 showed that patient required assistance with dressing, bathing, toileting, cleaning, meal preparation, cooking, laundry, and transportation. She had limited mobility and was in constant pain. The recommendation is to provide home health care 24/7 to assist her in activities of daily living, specifically on the abovementioned activities. However, as recommended by the guidelines, home health services should not include personal care and homemaker services. There is no clear indication in the medical records provided that the patient has a need of professional nursing services for the purposes of home health. Furthermore, the present request exceeded the recommendation of no more than 35 hours per week. The request for a home health aide for 24 hours daily, seven days weekly, for twelve weeks, is not medically necessary or appropriate.