

Case Number:	CM14-0135617		
Date Assigned:	08/29/2014	Date of Injury:	06/19/2006
Decision Date:	10/29/2014	UR Denial Date:	08/08/2014
Priority:	Standard	Application Received:	08/22/2014

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 Physical Medicine and Rehabilitation, has a subspecialty in Pain Medicine and Spinal Cord Medicine and is licensed to practice in Massachusetts. 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 claimant has a history of a work-related injury occurring 06/19/06. He has a chronic nonhealing right lower extremity venous stasis ulcer and was admitted for wound care on 11/06/13. He had cellulitis with chronic and acute findings. He was admitted for a course of intravenous antibiotics. He had been sent from a wound care clinic after his ulcer had worsened. He was living with his family and attending the wound care clinic two times per week as an outpatient. He was discharged on 11/11/13 with continued wound care. No surgery was performed. He was stable at discharge.

IMR ISSUES, DECISIONS AND RATIONALES

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

RN Visits for 9 Weeks for Wound Care Dressing: 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 Official Disability Guidelines (ODG) Pain (Chronic), Home health services

Decision rationale: The claimant has a history of a work-related injury in 2006 and continues to be treated for a chronic nonhealing right lower extremity venous stasis ulcer. He was admitted for inpatient treatment in November 2013. Home health services are recommended only for necessary medical treatments for patients who are homebound and unable to perform treatments without assistance. In this case, the claimant had been attending an outpatient wound care clinic prior to the hospital admission. He was hospitalized for less than one week and his treatment course appears uncomplicated. There was no identified new impairing event or acute injury and continued care could have been provided on an outpatient basis. Therefore, the request of RN Visits for 9 Weeks for Wound Care Dressing is not medically necessary and appropriate.

Home Health Aid for 4 Hours a Week: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Pain (Chronic), Home health services. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain (Chronic), Home health services

Decision rationale: The claimant has a history of a work-related injury in 2006 and continues to be treated for a chronic nonhealing right lower extremity venous stasis ulcer. He was admitted for inpatient treatment in November 2013. Home health services are recommended only for necessary medical treatments for patients who are homebound and unable to perform treatments without assistance. In this case, the claimant had been attending an outpatient wound care clinic prior to the hospital admission. He was hospitalized for less than one week and his treatment course appears uncomplicated. There was no identified new impairing event or acute injury and continued care could have been provided on an outpatient basis. Therefore, the request of Home Health Aid for 4 Hours a Week is not medically necessary and appropriate.