

Case Number:	CM14-0157535		
Date Assigned:	09/30/2014	Date of Injury:	10/21/2007
Decision Date:	10/28/2014	UR Denial Date:	08/29/2014
Priority:	Standard	Application Received:	09/25/2014

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, has a subspecialty in Orthopedic Spine Surgery and is licensed to practice in New York. 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 patient is a 47-year-old male with a date of injury of October 21, 2007. The patient has right lower extremity pain. He's failed conservative care. He's had hip injection. X-ray shows arthritis of the hip. The patient has been told to lose weight. The medical records indicate that the patient needs to undergo total hip arthroplasty. At issue is whether 7 days postoperative hospital stay is medically necessary.

IMR ISSUES, DECISIONS AND RATIONALES

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

Inpatient hospital stay, QTY: 7days: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Treatment Index, 18th Edition (web), 2013: Hip Procedure, Arthroplasty and Hospital Length of Stay (LOS) Guidelines

MAXIMUS guideline: Decision based on MTUS Postsurgical Treatment Guidelines.

Decision rationale: Guidelines do not support 7 day hospital stay after uncomplicated total hip surgery. 7 days postoperative hospital stay of total hip surgery is excessive. Best practice guidelines indicate significantly less number of days postoperatively. 7 days postoperative hospital stays successive that the total hip replacement surgery is not recommended as per

current guidelines. The medical records do not indicate that the patient has any underlying medical factors that would warrant excessive hospital stay is a total hip surgery.