

Case Number:	CM14-0027403		
Date Assigned:	06/13/2014	Date of Injury:	10/15/2013
Decision Date:	07/16/2014	UR Denial Date:	02/19/2014
Priority:	Standard	Application Received:	03/04/2014

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 Neuromuscular Medicine and is licensed to practice in Arizona. 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:

This is a 57 year old teacher who was walking up a flight of stairs on 10/15/2013 when he slipped on a pencil causing him to break his fall by forcefully stepping onto the next step, causing him to fall onto his left lateral hip, left shoulder and neck. The patient has a history of bilateral hip arthrodesis in 2006 with a reported difficulty in weight bearing on his left leg and a history of back surgery. Plain radiographs of the bilateral hips on 10/15/2013 with a finding of a lucency through the neck of the left arthroplasty which 'is worrisome for mild separation with heterotrophic ossification within the periarticular soft tissue' that is interpreted as a possible femoral prosthetic neck fracture. The patient underwent a revision of his left hip arthroplasty / prosthesis on 01/11/2014 with assignment of physical and occupational therapy post-operatively, as well as being wheel chair bound until he is able to bear weight on his left leg, which is estimated to be approximately 3 months post-operatively. In dispute is a Home health Aid 6 hour a day for 6 days a week.

IMR ISSUES, DECISIONS AND RATIONALES

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

HOME HEALTH AIDE 6 HOURS A DAY FOR 6 DAYS A WEEK: Overturned

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Hip & Pelvis (Acute & Chronic), Home Health Services.

Decision rationale: Home Health Services are recommended only for otherwise recommended medical treatment for patients who are homebound, on a part-time or "intermittent" basis. Early discharge after hip arthroplasty with home support resulted in re-admission rates less than 1% and high patient satisfaction. According to the orthopedic surgeons post-surgical plan he 'anticipate 2 weeks to become modified independent and be able to navigate 20 stairs inside the house with assistance'. The patient was given the benefit of both Physical and Occupational therapy post operatively to assist in his rehabilitation following revision of his left arthroplasty prosthesis. His orthopedic surgeon recognized the patient's limitations in performing activities of daily living (ADLs), having to navigate a flight of 20 stairs within his home and his weight (250 pounds) until he can bear weight, a period 3 months post-operatively per the Orthopedic surgeons report dated 1/23/2014. The most striking statement is the fact that "he will" "need some caregiver hours for ADLs and homemaking as he will be alone after discharge during the days" a fact the Utilization Reviewing provider neglected to read.