

Case Number:	CM14-0033317		
Date Assigned:	06/20/2014	Date of Injury:	03/26/2007
Decision Date:	07/25/2014	UR Denial Date:	02/21/2014
Priority:	Standard	Application Received:	03/17/2014

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 General Surgery 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:

This 57 year old male with a history of Crohn's disease has had several abdominal surgeries including several ventral hernia repairs and recurrences of same. The patient's date of injury was 3/26/07. Hernia repairs were done 4/2008, 1/2012, and 2/2013. The patient is also a diabetic with hypertension, chronic obstructive pulmonary disease, alcohol dependence, a history of pancreatitis, and renal dysfunction. The requesting provider is seeking authorization for a recurrent hernia. On 5/22/13, he stated that the patient needs definitive abdominal wall reconstruction and complex ventral hernia repair. The last repair involved a recurrence with removal of infected mesh in 2/2013. It appears that a recurrent hernia repair was not done at that time. A CT Scan of the abdomen and pelvis 11/18/13 showed a large hernia in the anterolateral right abdominal wall similar to that seen on an examination 9/7/13. On 12/1/13, he was admitted with altered mental status. Chest x-ray suggested developing pneumonia. It appears that now the request is for ventral hernia repair, simple incisional for recurrent, reducible hernia.

IMR ISSUES, DECISIONS AND RATIONALES

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

Ventral Hernia Repair, simple incision for recurrent, reducible hernia: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Hernia Chapter, Ventral Hernia Repair.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Hernia section.

Decision rationale: This patient has been seen in the Emergency Room on several occasions. There does not appear to be a progress note from the surgeon requesting recurrent hernia repair surgery. Furthermore, the most recent CT scan reports a large ventral hernia as described above. This was the result of an infected mesh removal. The surgeon has not reported an examination result to go along with the request for repair. As such, the request is not medically necessary and appropriate.