

Case Number:	CM14-0062165		
Date Assigned:	07/11/2014	Date of Injury:	04/09/2007
Decision Date:	08/26/2014	UR Denial Date:	04/15/2014
Priority:	Standard	Application Received:	05/05/2014

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 Family Medicine and is licensed to North Carolina. 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 an original date of injury of 4/9/2007. He slipped and fell while working as a teacher's aide. He is currently treated for bilateral carpal tunnel syndrome, chronic thoracic and lumbar back pain, chronic neck pain and frozen left shoulder. He has been treated in the past with cervical fusion, left knee replacement, cervical revision. He currently uses oral pain medications which reduce his pain from 9/10 to 4-5/10. The request is for 20 hours per week of housekeeping services.

IMR ISSUES, DECISIONS AND RATIONALES

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

Six (6) Months of Housekeeping at 20 Hours per week.: Upheld

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

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

Decision rationale: CA MTUS allows for the use of home health services for homebound claimants on an intermittent basis. Homemaker services such as personal care, shopping, cleaning and laundry are specifically excluded in the CA MTUS. The medical record does not describe any need for home health services other than homemaker services. The claimant is not

certified as homebound and the service requested is 20 hours of housekeeping per week for six months. Housekeeping services are explicitly excluded from home health services and are not otherwise addressed in the MTUS. Therefore, 20 hours per week of housekeeping services for 6 months are not medically necessary.