

Case Number:	CM14-0193500		
Date Assigned:	12/01/2014	Date of Injury:	09/09/2002
Decision Date:	01/13/2015	UR Denial Date:	10/22/2014
Priority:	Standard	Application Received:	11/18/2014

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 Internal Medicine 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:

The injured worker (IW) is a 57-year old woman with a date of injury of September 9, 2002. The mechanism of injury is documented as a cumulative trauma. The specific injuries sustained were not detailed in the medical record. Pursuant to the handwritten, partly illegible Primary Treating Physician's Progress Report (PR-2) dated October 8, 2014, the IW complains of bilateral shoulder pain and discomfort with weakness, and limited range of motion. She has difficulty performing activities of daily living (ADLs) such as grocery shopping, brushing teeth, (?-illegible), and closing doorknob. The pain has remained the same since last exam. The pain is characterized by moderate to severe. It is described as frequent, constant, sharp, and burning. Objective physical examination revealed bilateral shoulder tenderness to palpation (TTP) at (?-illegible), post (?-illegible), SST, AC, SA. Flexion 90/extension 40/abduction 85/adduction 40/LR 62/ER 70. Positive crepitus, and positive (illegible). Cervical spine evaluation revealed TTP at bilateral PVH, trapezius. (+) compression (+) distraction. Decreased active range of motion, 1+ DTR bilateral upper extremities. +4/5 motor all planes bilaterally. The IW has been diagnosed with bilateral full thickness tear SST, and bursitis. The remained of the diagnoses were illegible. The treating physician recommends the following: Proceed with authorization for right shoulder surgery for rotator cuff repair, decompression. Follow-up in 4 to 6 week for progress and request transportation to and from doctor office visits and therapy appointments. A progress noted dated November 12, 2014 indicated that the IW does not drive and has difficulty with taking bus, as riding the bus increased lumbar and cervical spine pain and reaching for the handrails caused increased bilateral shoulder pain.

IMR ISSUES, DECISIONS AND RATIONALES

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

Transportation to and from doctor's appointments and physical therapy: 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 Other Medical Treatment Guideline or Medical Evidence: http://www.aetna.com/cpb/medical/data/200_299/0218.html

Decision rationale: Pursuant to the Aetna Clinical Policy Bulletin: Home Health Aides, transportation to and from doctor's appointments and physical therapy is not medically necessary. The Aetna clinical policy bulletin (see attached link) states transportation is not considered medically necessary. In this case, the injured worker has bilateral shoulder tears. The injured worker was attempting to set up transportation to and from doctor's offices and physical therapy. The injured worker claims she has difficulty taking the bus, reaching for handrails. Aetna clinical policy states transportation is not considered a medically necessary service. The ACOEM, chronic pain medical treatment guidelines and the official disability guidelines do not address transportation. The initial utilization review physician requested additional information that was never received. Difficulty with transportation does not preclude the injured worker from arranging other modes of transportation. The handwritten notes were largely illegible. Consequently, based on the Aetna Policy Bulletin and the nonresponsive response to the utilization review physician, transportation to and from doctor's appointments and physical therapy is not medically necessary.

Home health care assistance: 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 Other Medical Treatment Guideline or Medical Evidence: http://www.aetna.com/cpb/medical/data/200_299/0218.html

Decision rationale: Pursuant to the Aetna Clinical Policy Bulletin: Home Health Aides, home healthcare assistance is not medically necessary. See attached link. Aetna considers the services of a home health aide medically necessary in selected cases when both of the following criteria are met: the services of a home health aide or rendered in conjunction with intermittent skilled home health care services provided by licensed practical or registered nurse, occupational therapist, physical therapist or speech therapist; and assisting with the prescribed exercise regimen, activities of daily living, changing nonsterile dressings that do not require the skills of a licensed nurse, etc. The ACOEM, chronic pain medical treatment guidelines and the official disability guidelines do not address transportation. In this case, the documentation indicates the injured worker will be traveling for physical therapy. The handwritten notes were largely illegible. Based on the documentation home health aide will not be rendering or assisting with an

occupational therapist, physical therapist or speech therapist in the home. Consequently, a home health aide is not medically necessary. Based on the clinical information in the medical record and peer-reviewed evidence-based guidelines, home healthcare assistance is not medically necessary.