

Case Number:	CM15-0186574		
Date Assigned:	09/28/2015	Date of Injury:	11/06/2009
Decision Date:	11/10/2015	UR Denial Date:	09/03/2015
Priority:	Standard	Application Received:	09/22/2015

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: California, Hawaii

Certification(s)/Specialty: Physical Medicine & Rehabilitation

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 is a 69-year-old male who sustained an industrial injury 11-6-2009. Diagnoses have included right knee end-stage medial compartment osteoarthritis, left knee posttraumatic osteoarthritis, status post total left knee replacement 6-14-2013, cervical disc disease, lumbar disc disease, right shoulder rotator cuff tear, and status post right shoulder rotator cuff repair. The injured worker was approved on 6-1-2015 for total right knee arthroplasty which as of 7-30-2015 did not have a scheduled date noted. In that note, the physician states the injured worker's wife is disabled and unable to provide care and he will have "zero" help at home post- surgery. The treating physician's plan of care includes a request submitted 8-11-2015 for a four week rehabilitation inpatient stay post-right total knee arthroplasty, which was modified on 9-13- 2015 to a 6-12 day stay. The injured worker is not working.

IMR ISSUES, DECISIONS AND RATIONALES

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

In-patient rehabilitation stay for 4 weeks, post right total knee arthroplasty: 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), Knee and Leg - Skilled nursing facility LOS (SNF).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG online, Knee & Leg, Skilled nursing facility LOS (SNF).

Decision rationale: The patient presents with pain affecting the right knee. The current request is for In-patient rehabilitation stay for 4 weeks, post right total knee arthroplasty. The treating physician report dated 8/28/15 (32B) states, "Schedule appointment for the authorized right total knee arthroplasty. Request authorization for four weeks of inpatient rehab after right total knee arthroplasty." The MTUS guidelines do not address the current request. The ODG guidelines have the following: "Recommend up to 10-18 days in a skilled nursing facility (SNF) or 6-12 days in an inpatient rehabilitation facility (IRF), as an option but not a requirement, depending on the degree of functional limitation, ongoing skilled nursing and / or rehabilitation care needs, patient ability to participate with rehabilitation, documentation of continued progress with rehabilitation goals, and availability of proven facilities, immediately following 3-4 days acute hospital stay for arthroplasty." In this case, the current request of 4 weeks exceeds the recommendation of 6-12 days as outlined by the ODG guidelines in the "Knee & Leg" chapter. Furthermore, there was no rationale by the physician in the documents provided as to why the patient requires treatment above and beyond the ODG guidelines. The current request is not medically necessary.