

Case Number:	CM15-0204358		
Date Assigned:	10/21/2015	Date of Injury:	04/22/2015
Decision Date:	12/03/2015	UR Denial Date:	10/09/2015
Priority:	Standard	Application Received:	10/19/2015

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: Illinois, California, Texas
 Certification(s)/Specialty: Orthopedic Surgery

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 injured worker is a 33-year-old male police officer who sustained an industrial injury on 4/22/15. Injury occurred while he was training at the gym. Past surgical history was positive for rotator cuff repair, hand fracture repair, and meniscal repair. Past medical history was negative. The 5/19/15 lumbar spine MRI impression documented a L5/S1 central and right paramedian disc protrusion resulting in right S1 nerve root displacement. The 9/29/15 spine surgery report cited right low back pain radiating down the right lower extremity to the foot. Physical exam documented restricted lumbar range of motion, positive right straight leg raise, right calf weakness, intact sensation, and decreased right ankle reflexes. The diagnosis was right L5/S1 disc herniation, right sciatica, and right S1 radiculopathy. Conservative treatment had included physical therapy and medication management. Authorization was requested for a right L5/S1 microdiscectomy with associated pre-operative medical clearance, post-operative lumbar brace, and assistant surgeon. The 10/9/15 utilization review certified the requests for right L5/S1 microdiscectomy, medical clearance, and post-op lumbar brace. The request for an assistant surgeon was modified to a surgical assistant (RN, PA, or surgical technician) as there was no provided rationale as to why a board-certified surgeon would be needed for this procedure.

IMR ISSUES, DECISIONS AND RATIONALES

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

Associated Surgical Services: Assistant Surgeon: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines: Low Back - Surgical assistant.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Centers for Medicare and Medicaid services, Physician Fee Schedule: Assistant Surgeons, <http://www.cms.gov/apps/physician-fee-schedule/overview.aspx>.

Decision rationale: The California MTUS guidelines do not address the appropriateness of assistant surgeons. The Center for Medicare and Medicaid Services (CMS) provide direction relative to the typical medical necessity of assistant surgeons. The Centers for Medicare & Medicaid Services (CMS) has revised the list of surgical procedures which are eligible for assistant-at-surgery. The procedure codes with a 0 under the assistant surgeon heading imply that an assistant is not necessary; however, procedure codes with a 1 or 2 implies that an assistant is usually necessary. For this requested surgery, CPT code 62287, there is a "1" in the assistant surgeon column. Therefore, based on the stated guideline and the complexity of the procedure, this request is medically necessary.