MAXIMUS Federal Services

Case Number:	CM15-0024340		
Date Assigned:	02/13/2015	Date of Injury:	01/22/2000
Decision Date:	04/20/2015	UR Denial Date:	01/27/2015
Priority:	Standard	Application Received:	02/09/2015

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
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 56 year old male who sustained an industrial injury on 01/22/2000. Current diagnoses include large hemorrhoid, gastroesophageal reflux disease (GERD), and constipation. Previous treatments included medication management and endoscopy. Report dated 01/13/2015 noted that the injured worker presented with complaints that included rectal pain and bright blood per rectum. Physical examination was positive for a large hemorrhoid. Of note this report was hand written and many entries were not legible. Utilization review performed on 01/27/2015 non-certified a prescription for 1 surgical consult, based on the clinical information submitted does not support medical necessity. The reviewer referenced the Standards Practice Task Force of the American Society of Colon and Rectal Surgeons in making this decision.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 surgical consult: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Rivadeneira DE, Steele SR, Ternent C, Chalasani 5, Bule WD, Rafferty JL, Standards Practice Task Force of the American Society of Colon and Rectal Surgeons. Practice parameters for the management of hemorrhoids (revised 2010). Dis Colon Rectum. 2011 Sep;54(9):1059-64. [56 references] PubMed.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Practice Guidelines, 2nd Edition (2004), Independent medical examination and consultations. Ch:7 page 127.

Decision rationale: Based on the 12/2/14 progress report provided by the treating physician, this patient presents with rectal pain, constipation, rectal bleeding, and improved reflex. The treater has asked for 1 SURGICAL CONSULT on12/2/14. The patient's diagnosis per Request for Authorization form dated 12/2/14 is external hemorrhoid. The patient has a large hemorrhoid upon a rectal exam, and a colonoscopy revealed large internal/external hemorrhoids per 12/1/14 report. The treater states that the only treatment option for this gentleman is surgical treatment per 12/1/14 report. The only prior procedure mentioned was a colonoscopy performed on 10/23/14. The patient is currently taking Amitiza, Ultram, Robaxin, Neurontin, Omeprazole, Polyethylene glycol, Cymbala, Trazodone, Xanax, and Seroquel as of 10/21/14 report. The patient's work status is not included in the provided documentation. MTUS guidelines discuss surgical consultations, but did not address consultations for opinion on treatment options. Other guidelines were used in this case. ACOEM Chapter 7 was not adopted into the MTUS guidelines, but would be the next highest review standard. ACOEM Practice Guidelines, 2nd Edition (2004), Chapter 7, Independent Medical Examination and Consultations, page 127 states: The occupational health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial factors are present, or when the plan or course of care may benefit from additional expertise. The treater is requesting a surgical consultation for a potential rectal surgery. The request appears to be appropriate, as the plan or course of care may benefit from additional expertise. The patient has large internal and external hemorrhoids, and the treater states that surgical intervention is the only option. The request for a surgical consultation IS medically necessary.