

<b>Case Number:</b>	CM14-0110076		
<b>Date Assigned:</b>	08/01/2014	<b>Date of Injury:</b>	11/03/1998
<b>Decision Date:</b>	10/17/2014	<b>UR Denial Date:</b>	06/16/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/14/2014

### 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 General Surgery and is licensed to practice in Texas. 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:

This is 50 year old female injured worker who sustained an alleged industrial injury on 11/03/1998 when she tripped on a section of uneven ground. The claimant has had chronic knee pain and has developed multiple psychologically problems, including but not limited to depression, anxiety, visual and auditory hallucinations and suicidal ideation. The injured worker is to have interventions such as group and individual therapy and psychopharmacologic intervention and management such that multiple appointments are scheduled. There are requests for 24/7 homecare by a psych technician or skilled licensed vocational nurse for the next six to twelve (6-12) months and Transportation to all medical appointments.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**24/7 Homecare by a psych technician or skilled LVN for th next six to twelve (6-12) months:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Home health services.

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

**Decision rationale:** The injured worker has major depressive disorder and has become dysfunctional. However the claimant will have intervention such as group and individual therapy and psychopharmacologic intervention and management such that the 6-12 months is unrealistic. The injured worker needs to show improvement or lack thereof otherwise, the length of time requested anticipates for poor progress and little improvement and would engender therapist dependence. The documentation reveals the injured worker to have marked anhedonia but not to the level of psychomotor retardation. The claimant has pain with ambulation but this will improve over time as any post op condition. Therefore the 6-12 months requested remains not medically necessary.

**Transportation to all medical appointments:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Knee and Leg Chapter, Transportation (to & from appointments)

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee, Transportation

**Decision rationale:** The injured worker has pain with ambulation and psychological problem that interferes with her ability to drive safely. However the claimant will have intervention such as group and individual therapy and psychopharmacologic intervention and management such that transportation to all medical appointments for an unspecified and indefinite period of time is unrealistic. Therefore the request for unspecified length of time for transportation to medical appointments is not medically necessary.