

Case Number:	CM15-0062786		
Date Assigned:	04/08/2015	Date of Injury:	03/03/2015
Decision Date:	05/14/2015	UR Denial Date:	03/30/2015
Priority:	Standard	Application Received:	04/02/2015

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: Internal Medicine

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 45-year-old female, with a reported date of injury of 03/03/2015. The diagnoses include open wound of the left knee/leg. Treatments to date have included an MRI of the left lower extremity, antibiotics, ibuprofen, wound care, Norco, Tylenol, topical antibiotic, and physical therapy. The medical report dated 03/23/2015 indicates that the injured worker had a large wound to the left lateral ankle after a crush injury. The objective findings include a moderate bloody drainage, without odor and thick black tissue that was beginning to lift. The pain was rated 8 out of 10. The treating physician requested hyperbaric oxygen therapy.

IMR ISSUES, DECISIONS AND RATIONALES

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

Hyperbolic oxygen therapy 120 units for 60 days/30 visits for 60 days: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Hyperbolic oxygen therapy for diabetic skin ulcers.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Ankle & Foot (Acute & Chronic) Hyperbaric oxygen therapy (HBOT). ACOEM 3rd edition - Ankle and foot.

Decision rationale: Medical Treatment Utilization Schedule (MTUS) does not address hyperbaric oxygen therapy. American College of Occupational and Environmental Medicine (ACOEM) 3rd edition (2011) does not indicate that hyperbaric oxygen therapy is recommended for ankle and foot disorders. Official Disability Guidelines (ODG) Ankle & Foot (Acute & Chronic) indicates that the routine use of hyperbaric oxygen therapy (HBOT) is not justified for any type of wound. Centers for Medicare & Medicaid Services (CMS) National Coverage Determination (NCD) for Hyperbaric Oxygen Therapy (20.29) indicates that the use of hyperbaric oxygen (HBO) therapy is covered as adjunctive therapy only after there are no measurable signs of healing for at least 30 days of treatment with standard wound therapy and must be used in addition to standard wound care. Wounds must be evaluated at least every 30 days during administration of hyperbaric oxygen (HBO) therapy. Continued treatment with hyperbaric oxygen (HBO) therapy is not covered if measurable signs of healing have not been demonstrated within any 30 day period of treatment. The progress report dated 3/18/15 documented a left ankle crush injury on 3/3/15. The 3/3/15 crush injury resulted in a wound to the left lateral ankle. Medical history includes diabetes mellitus type II and hypertension. Physical examination demonstrated left lateral ankle wound, with no evidence of infection. Hyperbaric oxygen (HBO) therapy for 60 days was requested on 3/18/15. CMS National Coverage Determination (NCD) indicates that the use of hyperbaric oxygen (HBO) therapy is covered only after there are no measurable signs of healing for at least 30 days of treatment with standard wound therapy. The date of injury was 3/3/15 and the request for HBO therapy was 3/18/15, which is 15 days after the 3/3/15 injury. CMS guidelines requires 30 days of treatment. Hyperbaric oxygen (HBO) therapy for 60 days was requested on 3/18/15. CMS guidelines limit treatment to 30 days of treatment. Wounds must be evaluated at least every 30 days. Continued treatment requires measurable signs of healing. ACOEM 3rd edition does not indicate that hyperbaric oxygen therapy is recommended for ankle and foot disorders. ODG indicates that the routine use of hyperbaric oxygen therapy is not justified for any type of wound. The request for 60 days of hyperbaric oxygen (HBO) therapy is not supported by ACOEM, ODG, or CMS guidelines. Therefore, the request for hyperbaric oxygen therapy for 60 days is not medically necessary.