

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Orthopedic Surgery 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 physician 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.

DOCUMENTS REVIEWED

The following relevant documents received from the interested parties and the documents provided with the application were reviewed and considered. These documents included:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

CLINICAL CASE SUMMARY

The physician reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

The patient is a 51-year-old female who underwent left total knee replacement with revision on 07/31/2012. The patient was treated postsurgically with physical therapy and medications. The patient underwent left knee manipulation under anesthesia, arthroscopy and loose body removal, and synovectomy in 10/2013. This was followed by a course of physical therapy. In 12/2013, the patient developed an infection of the left leg at the site of the total knee arthroplasty. The patient's treatment plan included left knee removal of the hardware and insertion of a spacer and a 1 month stay in a skilled nursing facility.

IMR DECISION(S) AND RATIONALE(S)

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

1. Urgent Xarelto 10 mg 1 tab QD #12 tablets is not medically necessary and appropriate.

The Claims Administrator based its decision on the ODG Knee and Leg, Rivaroxaban (Xarelto), which is not part of the MTUS.

The Physician Reviewer based his/her decision on the Official Disability Guidelines (ODG), Knee and Leg, Rivaroxaban (Xarelto).

The Physician Reviewer's decision rationale:

The clinical documentation does indicate the patient required removal of implanted hardware in the knee secondary to infection. Official Disability Guidelines state, "Rivaroxaban is recommended for the prophylaxis of deep vein thrombosis (DVT) and pulmonary embolism (PE) in patients undergoing hip and knee replacement surgery. Prophylaxis or venous thromboembolism for at least 10 days after total knee arthroplasty is recommended and that given surgery is substantial with patients who suffer VTE having longer hospital stay, needing

systemic anticoagulation for 6 to 12 weeks, and potentially facing substantial physical limitation during rehabilitation and recovery.” However, the clinical documentation submitted for review does not provide any evidence that the patient actually underwent this surgery. Therefore, the need for prophylaxis treatment for venous thromboembolism would not be indicated. Additionally, there is no documentation the patient is intolerant of warfarin which is more widely used as a first-line treatment. As such, the requested Xarelto 10 mg 1 tablet every day #12 tablets is not medically necessary or appropriate.

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[REDACTED]
[REDACTED]
[REDACTED]