

<b>Case Number:</b>	CM13-0015287		
<b>Date Assigned:</b>	01/17/2014	<b>Date of Injury:</b>	11/22/2005
<b>Decision Date:</b>	03/25/2014	<b>UR Denial Date:</b>	08/07/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/22/2013

### 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, and is licensed to practice in California. 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. 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:

According to the records made available for review, this is a 41-year-old male with an 11/22/05 date of injury. At the time of request for authorization for 12 additional sessions of physical therapy for the left knee two times per week for six weeks, there is documentation of subjective (left knee pain) findings, current diagnoses (s/p left knee arthroscopy and tear of lateral cartilage and knee meniscus, primary osteoarthritis lower leg, and chondromalacia of the patella), and treatment to date (physical therapy, activity modification, and medications). There is no documentation of the number of previous physical therapy treatments and objective improvement with previous treatment.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**12 additional sessions of physical therapy for the left knee two times per week for six weeks:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Page(s): 114. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Knee Chapter, Physical medicine treatment.

**Decision rationale:** The MTUS reference to ACOEM identifies documentation of a time-limited treatment plan with clearly defined functional goals, with frequent assessment and modification of the treatment plan based upon the patient's progress in meeting those goals, as criteria necessary to support the medical necessity of physical therapy. The Official Disability Guidelines (ODG) recommend a limited course of physical therapy for patients with a diagnosis of chondromalacia of the patella not to exceed 9 sessions over 8 weeks and documentation of exceptional factors when treatment duration and/or number of visits exceed the guidelines. Within the medical information available for review, there is documentation of diagnoses of status post left knee arthroscopy, tear of lateral cartilage and knee meniscus, primary osteoarthritis of the lower leg, and chondromalacia of the patella. In addition, there is documentation of previous physical therapy, functional deficits, and functional goals. However, there is no documentation of the number of previous physical therapy treatments and, if the number of treatments have already exceeded recommended guidelines, a statement why any residual deficits cannot be resolved in the context of a home exercise program. In addition, there is no documentation of objective improvement with previous treatment. Furthermore, the proposed number of sessions exceeds guidelines. Therefore, based on guidelines and a review of the evidence, the request for 12 additional sessions of physical therapy for the left knee two times per week for six weeks is not medically necessary.