

Case Number:	CM13-0027083		
Date Assigned:	11/22/2013	Date of Injury:	10/29/2005
Decision Date:	01/14/2014	UR Denial Date:	09/03/2013
Priority:	Standard	Application Received:	09/20/2013

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 physical medicine and rehabilitation 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.

CLINICAL CASE SUMMARY

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

Patient has a date of injury of 10.29/05 with cumulative injury 1/16/00 to 4/30/08. Patient underwent cervical discectomy and fusion on 1/31/13 with post-op dysphagia and residual pain. Patient is scheduled to start post op physical therapy on 9/12/13. It is unclear from the record if she received the physical therapy in Sept 2013. On exam she had tenderness, limited range of motion with normal neurological exam. Patient was seen by AME on 9/9/13 who recommended further PT for 24 visits. Patient was not P&S as of 9/9/13.

IMR ISSUES, DECISIONS AND RATIONALES

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

Land therapy twice per week for six week for the neck: Overturned

Claims Administrator guideline: Decision based on MTUS Postsurgical Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Physical Medicine, Postsurgical Treatment Guidelines Page(s): 26.

Decision rationale: Patient is status cervical spine fusion with post op pain and dysphagia. She was supposed to start PT (physical therapy) in September 2013. AME opinioned that she should have 24 visits of PT. Post surgical treatment guidelines allow 34 visits over 16 weeks. Since the patient has not had any PT postoperatively due to post op complication, it is reasonable for her to have physical therapy now given that she is now cleared by her surgeon to start physical therapy. Therefore the request for 12 sessions of physical therapy is reasonable and falls within the

guideline recommendations. The request for land therapy twice per week for six week for the neck is medically necessary and appropriate.