

Case Number:	CM13-0029148		
Date Assigned:	03/17/2014	Date of Injury:	05/17/2011
Decision Date:	04/15/2014	UR Denial Date:	09/12/2013
Priority:	Standard	Application Received:	09/24/2013

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 Internal Medicine and is licensed to practice in New York. 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:

The patient is a 36 year old male with a date of injury of 05/17/2011. On 04/11/2013 he had right arthroscopic surgery - partial medial meniscectomy, condroplasty of the medial femoral condyle and synovectomy. On 08/19/2013 the strength was 5/5. By 08/22/2013 he had completed 16 post operative physical therapy visits. Gait was normal. Right knee range of motion was 0 - 130. Strength was 4/5. There was a request for 4 more post operative physical therapy visits. On 09/24/2013 it was noted that he was walking 8 blocks.

IMR ISSUES, DECISIONS AND RATIONALES

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

POST OP PHYSICAL THERAPY FOR THE RIGHT KNEE: Upheld

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

MAXIMUS guideline: Decision based on MTUS Postsurgical Treatment Guidelines.

Decision rationale: MTUS ACOEM for post operative physical therapy has a maximum of 12 visits post meniscectomy. He already exceeded the guideline with 16 post operative physical therapy visits. By this point in time he should have been transitioned to a home exercise program and there is no documentation that continued formal physical therapy would be superior to a home exercise program. Additional post operative physical therapy is not consistent with the MTUS guidelines.

