

Case Number:	CM13-0029712		
Date Assigned:	11/01/2013	Date of Injury:	09/20/2012
Decision Date:	02/20/2014	UR Denial Date:	09/12/2013
Priority:	Standard	Application Received:	09/25/2013

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 & Rehabilitation, has a subspecialty in Interventional Spine 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:

This is a 56 year-old male, plumber, who was injured on 9/20/12, when the board he was walking on broke and he fell on his back and buttock. He has been diagnosed with bilateral L5 pars defect; grade 1 spondylolisthesis; L5 radiculitis. The IMR application shows a dispute with the 9/12/13 UR denial for Physical Therapy for the lumbar spine. The 9/12/13 UR letter is from [REDACTED], and states the patient already had 33 PT sessions and exceeds the guidelines.

IMR ISSUES, DECISIONS AND RATIONALES

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

physical therapy for lumbar spine, Two to Three times for four to six weeks: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 98-99.

Decision rationale: The 9/20/13 report from [REDACTED] states the patient had 12 PT visits with some improvement in strength and ROM. He requests 12 additional sessions to avoid surgery. The 8/19/13 report from [REDACTED], states that the patient is a surgical candidate and that PT will not solve or reverse his problems, but may put him at optimal levels to succeed with the

procedure. It states the patient is able to ride his bike, swim, go to the gym, and was working at core strengthening and stability. There was no rationale provided as to why he requires formal PT when he is reported to be able to perform the active therapies independently. The patient is not in a post-surgical physical medicine treatment timeframe, so the MTUS chronic pain treatment guidelines apply. MTUS recommends 8-10 sessions of PT for various or unspecified myalgias and neuralgias. The request for 18 sessions of PT will exceed MTUS recommendations. Therefore, Decision for physical therapy for lumbar spine, Two to Three times for four to six weeks is not medically necessary and appropriate.