

Case Number:	CM13-0037406		
Date Assigned:	12/13/2013	Date of Injury:	05/28/2009
Decision Date:	02/24/2014	UR Denial Date:	10/09/2013
Priority:	Standard	Application Received:	10/23/2013

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 Occupational Medicine 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:

The patient is a 40 year old with a date of injury of 5/28/2009 of his right ankle. The patient has had 6 weeks of PT since 10/2/13 that provided relief. The report indicated strength gains with plantar flexion of the ankle. There is also a request for 6 sessions of acupuncture. The diagnosis was traumatic internal derangement of the ankle, status post ligament repair on 9/4/09. The request states the patient is able to walk further and flex with more strength. The patient had 12 sessions of PT according to Peer to peer review 10/9/13. The patient had 34 sessions of PT from 11/2009 to 2/2010.

IMR ISSUES, DECISIONS AND RATIONALES

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

Physical therapy x 12 more sessions: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 99.

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

Decision rationale: MTUS physical medicine guides allow for fading of treatment from 3 times a week to once a week and progression to home exercise program (HEP). In this case there is no specific indication as to why additional therapy would benefit this patient as the patient has had

over 40 visits of physical therapy since surgery. There is no indication why the patient may not progress with a home exercise program as it appears that the patient had made gains with therapy including strength and flexion. The PT note in 7/13 also recommended a HEP. As written, 12 sessions of PT exceed chronic pain guidelines and are not appropriate.