

Case Number:	CM13-0042004		
Date Assigned:	12/27/2013	Date of Injury:	04/18/2012
Decision Date:	02/21/2014	UR Denial Date:	09/29/2013
Priority:	Standard	Application Received:	10/14/2013

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, has a subspecialty in Pain Management 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 male patient with a date of injury of April 18, 2012. A utilization review determination dated September 29, 2013 recommends modified certification of aquatic therapy to recommend for sessions, the initial request was for 6 sessions. A utilization review determination dated July 27, 2013 recommends a certification of 6 pool therapy sessions between July 25, 2013 and September 23, 2013. A progress report dated September 5, 2013 include subjective complaints indicating that the patient's symptoms are improved with acupuncture and 6 pool therapy sessions. The patient has lost 30 pounds on his own. Physical examination identifies lumbar spine tenderness with spasm and positive straight leg raise. Diagnoses include left lower extremity radiculopathy, multilevel degenerative disc disease and stenosis, and nerve root impingement at L4-L5. Treatment plan recommends requesting authorization for acupuncture and aquatic therapy.

IMR ISSUES, DECISIONS AND RATIONALES

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

6 Aquatic Therapy sessions: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 298, Chronic Pain Treatment Guidelines Page(s): 22, 98-99. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back Chapter, Physical Therapy.

Decision rationale: Regarding the request for additional aquatic therapy, Chronic Pain Treatment Guidelines state that aquatic therapy is recommended as an optional form of exercise therapy where available as an alternative to land-based physical therapy. They go on to state that it is specifically recommended whenever reduced weight bearing is desirable, for example extreme obesity. Guidelines go on to state that for the recommendation on the number of supervised visits, see physical therapy guidelines. Official Disability Guidelines recommends 10 therapy sessions for the treatment of spinal stenosis and intervertebral disc disorders, and 10-12 sessions for lumbar radiculopathy. Within the documentation available for review, there is no indication as to what specific objective functional improvement has been obtained with the therapy sessions already provided, or what objective treatment goals remain which would be unable to be addressed with an independent home exercise program. Additionally, it appears the patient has recently undergone six therapy sessions, and it is unclear whether the patient has had additional therapy sessions other than those. An additional 6 therapy sessions may exceed the number recommended by guidelines for his diagnoses. In the absence of clarity regarding those issues, the currently requested aquatic therapy is not medically necessary.