

Case Number:	CM13-0043275		
Date Assigned:	02/11/2014	Date of Injury:	08/07/2012
Decision Date:	05/02/2014	UR Denial Date:	09/26/2013
Priority:	Standard	Application Received:	10/22/2013

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 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 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 applicant is represented [REDACTED] employee who has filed a claim for chronic knee pain reportedly associated with a slip and fall industrial injury of August 7, 2012. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representation; a knee brace; Synvisc injection therapy; a total knee arthroplasty on May 22, 2013; and 33 sessions of postoperative physical therapy, per the claims administrator. In a Utilization Review Report of September 26, 2013, the claims administrator partially certified a request for 12 sessions of physical therapy as two additional sessions of physical therapy. Although, the applicant was outside of the four-month postsurgical physical medicine treatment period established in section 9792.24.3 following total knee arthroplasty on May 22, 2013, the claims administrator nevertheless cited MTUS 9792.24.3. The applicant subsequently appealed. In a progress note of August 29, 2013, it is stated that the applicant is three and a quarter months status post-surgery, is continuing physical therapy, and overall feels that he is doing well. He only intermittently uses Motrin after vigorous physical therapy. The applicant exhibited a normal gait and was possessed of 120 degrees of knee range of motion. The applicant was described as doing quite well. He was advised to progress the activities to include swimming, biking, distance walking, and golf. The applicant was returned to regular work. 12 sessions of physical therapy were endorsed.

IMR ISSUES, DECISIONS AND RATIONALES

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

Physical therapy two times a week for six weeks for the left knee: Upheld

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

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

Decision rationale: The applicant was outside of the four-month postsurgical physical medicine treatment period established in 9792.24.3 following a total knee arthroplasty surgery on May 22, 2013, as of the date of utilization review report, September 26, 2013. The MTUS Chronic Pain Medical Treatment Guidelines were therefore applicable. The 12-session course of treatment does represent treatment, in and of itself, in excess of the 9 to 10 session course recommended on page 99 of the MTUS Chronic Pain Medical Treatment Guidelines for myalgias and/or myositis of various body parts. It is further noted that both pages 98 and 99 of the MTUS Chronic Pain Medical Treatment Guidelines endorse tapering or fading the frequency of treatment over time and emphasizing self-directed home physical medicine. In this case, the applicant was described by the treating provider as having responded favorably to the earlier 33 sessions of physical therapy. The applicant was return to regular work as a peace officer. The applicant did exhibit a normal gait and normal knee range of motion. He is asked to perform swimming, hiking, and other independent exercises. Thus, it appears that the applicant was capable of transitioning toward an independent home exercise program as of the date of utilization review report, without a need for further formal physical medicine. Accordingly, the request is not certified, on Independent Medical Review.