

Case Number:	CM13-0049847		
Date Assigned:	12/27/2013	Date of Injury:	10/01/1989
Decision Date:	06/04/2014	UR Denial Date:	10/08/2013
Priority:	Standard	Application Received:	11/08/2013

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 Physical Medicine & Rehabilitation 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:

This is a 66 year old male claimant with a date of injury on 02/14/2006 diagnosed with knee replacement, chondromalacia patella, meniscal tear lateral, knee sprain/strain, and postsurgical state. The current issue to be addressed is a decision for eight physical therapy sessions. The prior Utilization Review modified the request to certify 2 additional physical therapy sessions, with a rationale that the claimant had received 24 sessions of postoperative physical therapy following a total knee replacement on 12/7/2012; however, there was no documentation that the patient had received an active self-directed home plan, only that the patient was diligently performing a daily home exercise. Therefore an additional 2 sessions of physical therapy were certified to receive instruction on a proper self-directed home physical therapy plan, with the remaining 6 physical therapy sessions being non-certified. According to a progress note dated August 14, 2013, the patient noted he plateaued in terms of his capacity and did not improve. It was noted the patient was working diligently on a home exercise program. He was limping and shifting his weight abnormally to the unaffected left leg producing a torquing force across the lumbar area, which was giving him compensatory back pain. On exam, he lacked 10° of full extension and was able to flex the knee to 120°. There was weakness at 4/5 with resistance to extension and 5/5 with resistance to flexion. The treatment plan was for another 8 sessions of physical therapy and consideration for a restoration program.

IMR ISSUES, DECISIONS AND RATIONALES

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

**EIGHT SESSIONS OF PHYSICAL THERAPY SESSIONS(THROUGH [REDACTED]
[REDACTED] BETWEEN 8/14/2013 AND 11/11/2013: Upheld**

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 338.

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

Decision rationale: As noted on pages 98-99 of the MTUS Chronic Pain Guidelines, patients are instructed and expected to continue active therapies at home as an extension of the treatment process in order to maintain improvement levels. The claimant underwent total knee arthroplasty on 12/07/2012 and completed 24 sessions of post-operative physical therapy. The remaining deficits were noted to be minimal, lacking 10° of full extension. An additional 2 sessions were certified to ensure that the patient was fully educated in a self-directed home physical therapy program. Given the extensive therapy received and minimal deficits remaining, an additional 8 sessions of supervised physical therapy would not be expected to result in a significant change over what could be accomplished in an independent home program. Therefore, an additional eight sessions of physical therapy sessions are not medically necessary and appropriate.