

Case Number:	CM13-0060317		
Date Assigned:	12/30/2013	Date of Injury:	10/03/1990
Decision Date:	03/27/2014	UR Denial Date:	11/11/2013
Priority:	Standard	Application Received:	12/03/2013

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 Family 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:

This injured worker's date of injury was 10/31/1990. The patient's treating physician is treating the patient for cervical degenerative disc disease. The physician has requested coverage for 12 visits of aquatherapy between 11/7/13 and 1/6/14.

IMR ISSUES, DECISIONS AND RATIONALES

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

Twelve (12) sessions of aquatherapy: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 22.

Decision rationale: The treating physician note dated 10/28/13 discussed the patient's lower back pain and "pain along the neck." On exam he had tenderness along the lower back muscles. The patient, he reports, is retired from work. The ODG physical therapy treatment guidelines specify 12 sessions maximum for neck pain from cervical disc disease. There is no documentation why, at this late stage of the patient's care, aquatherapy is indicated; nor is there any documentation of any outcomes from land based therapy. Based on the documentation, the request aquatherapy is non-certified.

