

Case Number:	CM13-0068432		
Date Assigned:	01/08/2014	Date of Injury:	06/27/2011
Decision Date:	05/28/2014	UR Denial Date:	11/27/2013
Priority:	Standard	Application Received:	12/19/2013

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 and Rehabilitation, has a subspecialty in Sports Medicine and is licensed to practice in Texas. 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 injured worker is a 58 year old female who reported an injury on 06/27/2011. There was no mechanism of injury provide in the documentation submitted for review. The injured worker was status post 04/18/2013 C4 to C6 decompressive surgery due to myelomalacia with slow improvement. The physical examination performed on 11/19/2013 noted cervical flexion at 50 degrees, extension rotation bilaterally was at 40 degrees and was pain free. There was 4/5 weakness in the right iliopsoas, quadriceps, tibialis anterior, toe extensors but full strength in the left. The bilateral triceps and left brachioradialis reflexes were 1. The injured worker underwent a functional capacity evaluation on 08/02/2013 and the overall test findings, in combination with clinical observations, suggested the presence of high levels of physical effort on the injured workers behalf. A progress report dated 12/20/2013 stated upon admission to the work hardening program the injured worker was able to carry 20 pounds and after 4 weeks of treatment, she was able to carry 35 pounds. The injured worker's goal to return to work was up to 70 pounds. The injured worker's initial grip strength was 42 on the right and 48 on the left, after 4 weeks of treatment it had improved to 49 on the right and 52 on the left with the goal being at 60 pounds. On admission her standing tolerance was 15 minutes with a cane, after 4 weeks she was able to stand for an hour without a cane; her goal was to stand for 2 hours. On admission the injured worker was able to squat 50% without supports and after 4 weeks she was able to squat 65% with support and her goal was unlimited squatting without assistance. On admission her stabilization level was a low mid 1, but by week 4 it was mid 2; her long-term goal was a high level 3. The request for authorization form regarding 8 additional sessions of work hardening program was not submitted for review.

IMR ISSUES, DECISIONS AND RATIONALES

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

EIGHT (8) ADDITIONAL SESSIONS OF WORK HARDENING (RFA: 11-19-13):

Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines WORK HARDENING Page(s): 125.

Decision rationale: The California MTUS guidelines note work hardening should be completed in 4 weeks consecutively or less. There was a submitted report dated 12/20/2013 which noted progressive subjective and functional goals and improvements documented by the physician. According to the guidelines treatment is not supported for longer than 1-2 weeks without evidence of patient compliance and demonstrated significant gains as documented by subjective and objective gains and measurable improvement in functional abilities. There was a lack of documentation indicating how long the injured worker participated in the work hardening program. There was a lack of documentation indicating the injured worker had improvement psychologically. Therefore, the request for Additional Sessions of Work Hardening is not medically necessary.