

Case Number:	CM13-0070072		
Date Assigned:	01/17/2014	Date of Injury:	05/14/2013
Decision Date:	04/22/2014	UR Denial Date:	12/16/2013
Priority:	Standard	Application Received:	12/24/2013

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 Internal Medicine & Emergency Medicine and is licensed to practice in Florida. 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 patient is a 46 year-old with a date of injury of 05/14/13. A progress report associated with the request for services, dated 12/03/13, identified subjective complaints of bilateral ankle pain. Objective findings included tenderness of the left ankle with decreased range-of-motion. Diagnoses included bilateral ankle sprain. Treatment has included oral steroids. The patient is reported to have received 18 physical therapy (PT) sessions split between the shoulders and ankles between June and September of 2013. The physical therapy notes state that she improved, but slower than expected. A Utilization Review determination was rendered on 12/16/13 recommending non-certification of "Physical therapy x 8; Phonophoresis with dexamethasone x 8".

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: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG).

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

Decision rationale: The Chronic Pain Medical Treatment Guidelines recommends physical therapy with fading of treatment frequency associated with "... active therapies at home as an extension of the treatment process in order to maintain improvement levels." Specifically, for myalgia and myositis, 9-10 visits over 8 weeks. For neuralgia, neuritis, and radiculitis, 8-10 visits over 4 weeks. For arthritis, 9 visits over 8 weeks. In this case, the patient has received 9 prior physical therapy sessions on the ankle. However, recommendations are for 9-10 sessions with the recommendation for fading of treatment frequency. Likewise, there is limited documentation for the home therapy component of this approach. Therefore, the record does not document the medical necessity for 8 additional sessions of ankle physical therapy. The request for eight sessions of physical therapy is not medically necessary and appropriate.

INCLUDE EIGHT PHONOPHORESIS WITH DEXAMETHASONE: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Ankle & Foot, Phonophoresis.

Decision rationale: The Medical Treatment Utilization Schedule (MTUS) does not address Phonophoresis. The Official Disability Guidelines (ODG) state that it is not recommended. The ODG indicates that there is little information available from trials to support many physical medicine modalities for treating disorders of the foot and ankle. The request to include eight Phonophoresis with dexamethasone of the ankle is not medically necessary and appropriate.