

Case Number:	CM14-0106307		
Date Assigned:	07/30/2014	Date of Injury:	10/29/2009
Decision Date:	08/29/2014	UR Denial Date:	06/06/2014
Priority:	Standard	Application Received:	07/09/2014

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, has a subspecialty in Interventional Spine 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 patient is a 59 year old with an injury date on 10/29/09. Patient complains of continued pain in the pes bursae (medial knee) per 5/29/14 report. A patient state there is still swelling at the pes bursae, and decreased range of motion of right knee per 5/29/14 report. Based on the 5/29/14 progress report provided by [REDACTED] the diagnosis is right pes bursae s/p bursectomy. Exam on 5/29/14 showed swelling at pes bursae, tenderness to palpation at pes bursae, right lower extremity atrophy. Range of motion of right knee is 0-105 degrees with pain. [REDACTED] is requesting physical therapy 12 sessions 2x6, right pes bursae, platelet rich plasma injection to right pes bursae, and acupuncture 12 visits 2x6, right pes bursae. The utilization review determination being challenged is dated 6/6/14 and modifies physical therapy to 6 visits, and acupuncture to 6 visits. [REDACTED] is the requesting provider, and he provided treatment reports from 7/1/13 to 6/26/14.

IMR ISSUES, DECISIONS AND RATIONALES

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

Physical therapy 12 sessions 2x6, right pes bursae: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 98-99.

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

Decision rationale: This patient presents with right knee pain and is s/p bursectomy of right pes bursa from 7/24/13. The physician has asked for physical therapy 12 sessions 2x6, right pes bursae on 5/29/14 . On 9/25/13, the physician requests physical therapy for right knee 2x6 weeks. On 11/7/13 the physician requests 12 sessions of physical therapy. On 2/15/14, patient is prescribed 2x6 physical therapy sessions. On 3/20/14 it says patient's condition is improving from the physical therapy and requests more sessions. The 4/22/14 report requests 12 physical therapy sessions. MTUS guidelines allows for 8-10 sessions of physical therapy for various myalgia's and neuralgias. It would appear the patient had approximately 4 months of physical therapy which would equal 32 sessions. The requested 12 sessions would exceed what MTUS guidelines allow. Therefore, this request is not medically necessary.

Platelet rich plasma injection to right pes bursae: Overturned

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Platelet-rich plasma (PRP).

Decision rationale: This patient presents with right knee pain and is s/p bursectomy of right pes bursa from 7/24/13. The physician has asked for Platelet Rich Plasma Injection to Right Pes Bursae on 5/29/14. Regarding Platelet-Rich Plasma Injections, ODG guidelines state that it's under study and that there is some support for chronic, refractory tendinopathy and early osteoarthritis. This patient underwent bursectomy and continues to have pain in this area at pes bursae. Given the support for tendinopathy, PRP injection trial may be reasonable for this patient. Therefore, this request is medically necessary.

Acupuncture 12 visits 2x6, right pes bursae: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM,Acupuncture Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Acupuncture for Neck and Low back Pain.

Decision rationale: This patient presents with right knee pain and is s/p bursectomy of right pes bursa from 7/24/13. The physician has asked for Acupuncture 12 Visits 2x6, right pes bursae on 5/29/14. The 8/15/13 report states patient is improving with acupuncture, and decreases pain on cold day. The 9/5/13 report's treatment plan states: acupuncture 2x6 weeks. The 11/7/13 utilization review report reduces request to 1x6 weeks of Acupuncture. The 12/26/13 report states patient is slowly improving due to the therapy. MTUS Acupuncture Guidelines allow 3-6 sessions of trial before additional treatment sessions are allowed. In this case, the physician does not explain how many sessions the patient has had. While the physician states the patient is

improving with acupuncture, there is no evidence of functional improvement. In fact, the physician continues to ask for additional medical treatments such as the PRP injection. For additional acupuncture, MTUS require documentation of functional improvement including reduced dependence on medical treatments. Therefore this request is not medically necessary.