

Case Number:	CM14-0012129		
Date Assigned:	03/07/2014	Date of Injury:	07/11/2012
Decision Date:	08/05/2014	UR Denial Date:	12/02/2013
Priority:	Standard	Application Received:	12/27/2013

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 Occupational 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 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 55-year-old female who has submitted a claim for medial and lateral meniscal tear of right knee, s/p right knee arthroscopy, chondromalacia right patellofemoral joint, associated with an industrial injury date of July 11, 2012. Medical records from 2012 through 2013 were reviewed. The latest progress report, dated 10/10/2013, showed persistent occasional discomfort and weakness involving her right knee. Recently, patient had an exacerbation of right knee pain with difficulty going down the stairs. Physical examination revealed tenderness along the medial compartment, medial joint line and medial arthroscopic portals of the right knee. There was minimal weakness on manual muscle test. Treatment to date has included right knee arthroscopy (05/24/2013), Synvisc One injection (08/29/2013) and 48 sessions of PT of right knee which included 12 sessions post-op PT of right knee and an additional 12 sessions for right knee. A utilization review from 12/02/2013 denied the request for 12 additional post-op sessions of physical therapy for right knee because the patient had done 48 sessions of PT in the past 13 months, which should have been ample opportunity for her to have been shown exercises so that she could transition to self-care at home. The therapists had plenty of opportunities to provide the necessary care and education to the patient.

IMR ISSUES, DECISIONS AND RATIONALES

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

ADDITIONAL POST-OP PHYSICAL THERAPY SESSIONS FOR THE RIGHT KNEE, #12: Upheld

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

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

Decision rationale: According to CA MTUS Postsurgical Treatment Guidelines, physical therapy for 12 visits over 12 weeks is recommended for postsurgical treatment of lateral/medial meniscus tear. In addition, pages 98-99 of the CA MTUS Chronic Pain Medical Treatment Guidelines states that patients are instructed and expected to continue active therapies at home as an extension of the treatment process in order to maintain improvement levels. In this case, the patient completed 12 sessions of post-op PT since May 2013 and an additional of 12 sessions since August 2013. The rationale for requesting additional therapy sessions is to strengthen the right knee. Physical therapy is necessary post-operatively; however, there was no significant objective finding of musculoskeletal deficit to support additional therapy. Furthermore, it was not clear why the patient would not be on the active, independent home program as recommended. Therefore, the request for post-op physical therapy 12 sessions for the right knee is not medically necessary.