

Case Number:	CM14-0125849		
Date Assigned:	09/05/2014	Date of Injury:	09/30/2001
Decision Date:	10/02/2014	UR Denial Date:	08/07/2014
Priority:	Standard	Application Received:	08/08/2014

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 Family Medicine, and is licensed to practice 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:

This is a 72-year-old male who reported an industrial injury to his neck on 9/30/2001, 13 years ago, attributed to the performance of his usual and customary work tasks. The patient is noted to be status post cervical spine fusion performed during 11/2012. The patient complained of balance problems and numbness to his fingers. There were no documented objective findings on examination. The diagnosis was cervical spine DDD status post cervical spine fusion. The treatment plan included 36 sessions of pool therapy directed to the cervical spine.

IMR ISSUES, DECISIONS AND RATIONALES

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

Pool therapy 2x6 for Cervical Spine: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Aquatic Therapy Page(s): 22.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 9 Shoulder Complaints, Chapter 12 Low Back Complaints Page(s): 203-204;299-300,Chronic Pain Treatment Guidelines Physical Medicine; Aquatic Therapy Page(s): 98-99 ;22. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2ndEdition, (2004) Chapter 6 page 114, Official Disability Guidelines (ODG) lower back section-PT; knee section-PT

Decision rationale: The patient has received prior sessions of physical therapy and has exceeded the recommendations of the CA MTUS. There is no rationale to support 2x6 sessions aquatic PT over the number of sessions recommended by the CA MTUS. The additional sessions are significantly in excess of the number of sessions of PT recommended by the CA MTUS. There is no demonstrated medical necessity for continued PT as maintenance care almost two (2) years after the date of surgery for the cervical spine fusion. There were no documented objective findings to support the medical necessity of aquatic therapy directed to the cervical spine. There is no provided objective evidence that the patient is precluded from performing a self-directed home exercise program for further conditioning and strengthening for the back and bilateral lower extremities. The patient is not demonstrated to not be able to participate in land-based exercises. There is no provided objective evidence to support the medical necessity of the requested additional aquatic therapy for the treatment of the neck in relation to the effects of the industrial injury. The patient should be in a self-directed home exercise program for conditioning and strengthening. There is no provided subjective/objective evidence to support the medical necessity of aquatic therapy or pool therapy for the cited diagnoses. The use of pool therapy with no evidence of a self-directed home exercise program is inconsistent with evidence-based guidelines. There is no demonstrated medical necessity for the requested 2x6 sessions of Aquatic Therapy directed to the cervical spine.