

Case Number:	CM14-0150887		
Date Assigned:	09/19/2014	Date of Injury:	03/25/2014
Decision Date:	10/17/2014	UR Denial Date:	09/04/2014
Priority:	Standard	Application Received:	09/16/2014

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 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 29-year-old male who has submitted a claim for internal derangement of knee NOS and s/p arthroscopic partial right medial meniscectomy associated with an industrial injury date of 3/25/2014. Medical records from 3/26/2014 up to 6/11/14 were reviewed showing s/p arthroscopic partial right medial meniscectomy. Patient still reports pain over the medial knee. There is constant pain over the lateral ankle and calf. Calf pain is associated with active ankle plantar flexion and heel raise. Physical examination revealed tenderness over the medial parapatella and medial joint line. There was swelling over lateral ankle. Patient experienced moderate difficulty performing single heel rise. Treatment to date has included arthroscopic partial right medial meniscectomy, post-operative physical therapy, Norco, and ibuprofen. Utilization review from 9/4/2014 denied the request for 8 Work conditioning sessions. The records failed to include documentation of the total number of physical therapy the patient has attended to date. Furthermore, there was no documentation of objective functional improvement with previous physical therapy.

IMR ISSUES, DECISIONS AND RATIONALES

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

8 Work conditioning sessions: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 125. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Physical Medicine Guidelines

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Work Conditioning/Work Hardening Page(s): 125. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Physical Medicine, Work Conditioning

Decision rationale: According to page 125 of the CA MTUS Chronic Pain Medical Treatment Guidelines, work conditioning is recommended as an option depending on the availability of quality programs. Criteria for admission to a work hardening program include work-related musculoskeletal condition with functional limitations precluding ability to safely achieve current job demands; after treatment with an adequate trial of physical therapy with improvement followed by plateau; not a candidate where other treatments would be warranted; worker must not be more than 2 years past injury date; a defined return to work goal; and the program should be completed in 4 weeks. ODG Physical Medicine Guidelines recommend 10 visits over 8 weeks for work conditioning. In this case, the patient is s/p arthroscopic partial right medial meniscectomy and was approved for 12 post-operative physical therapy sessions. However, the total number of completed physical therapy visits was not indicated. In addition, progress notes, functional improvement or lack thereof from physical therapy were not made available. It is unclear if the patient has reached a plateau with physical therapy warranting work conditioning sessions. Therefore the request for 8 Work conditioning sessions is not medically necessary.