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| <b>Case Number:</b>   | CM14-0154076 |                              |            |
| <b>Date Assigned:</b> | 09/23/2014   | <b>Date of Injury:</b>       | 12/03/2013 |
| <b>Decision Date:</b> | 11/28/2014   | <b>UR Denial Date:</b>       | 09/04/2014 |
| <b>Priority:</b>      | Standard     | <b>Application Received:</b> | 09/22/2014 |

### 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 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 applicant is a [REDACTED] employee who has filed a claim for knee pain reportedly associated with an industrial injury of December 3, 2013. Thus far, the applicant has been treated with the following: Analgesic medications; transfer of care to and from various providers in various specialties; unspecified amounts of physical therapy over the course of the claim; and a knee brace. In a Utilization Review Report dated September 4, 2014, the claims administrator denied a request for eight sessions of physical therapy. The MTUS Postsurgical Treatment Guidelines were cited. The claims administrator suggested, in its denial, that the applicant had had 24 prior sessions of postoperative physical therapy. The applicant subsequently appealed. In a July 28, 2014 progress note, the applicant was described as several months status post a left knee arthroscopy on March 27, 2014. The applicant also had issues with chondromalacia and also underwent a partial synovectomy, it was noted. The applicant stated that she was steadily improving. The applicant was also doing range of motion, strengthening, and stretching exercises on her own. The applicant was sleeping with difficulty. Full range of motion was noted despite a slight knee joint effusion. An additional eight sessions of physical therapy were sought. The applicant was returned to regular duty work in one section of the note, it was stated, and while another section of the note stated that the applicant had "retired." In an earlier note dated June 20, 2014, the applicant was given a knee corticosteroid injection and placed off of work, on total temporary disability. It was stated that the applicant had issues with knee degenerative joint disease.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Physical Therapy two (2) times a week for four (4) weeks for the left knee: Upheld**

**Claims Administrator guideline:** Decision based on MTUS Postsurgical Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Postsurgical Treatment Guidelines.

**Decision rationale:** The applicant was still within the six-month postsurgical physical medicine treatment period established in MTUS 9792.24.3 following earlier knee surgery of March 27, 2014 as of the date of the request. The claims administrator suggested in its Utilization Review Report that the applicant had already had 24 sessions of postoperative physical therapy. It is further noted that MTUS 9792.24.3.c.4 notes that the frequency of visits shall be gradually reduced or discontinued as an applicant gains independence in management of symptoms and with achievement of functional goals. In this case, the applicant was described on July 28, 2014 as "doing range of motion, stretching, and strengthening exercises on her own." The evidence on file, thus, pointed to the applicant's responding favorably to conservative treatment and having transitioned towards self-directed home physical medicine as of July 2014. It appeared, thus, that the applicant was/is achieving functional goals and could readily transition towards self-directed home physical medicine, as suggested in MTUS 9792.24.3.c.4, without the lengthy formal course of physical therapy proposed here. Therefore, the request is not medically necessary.