

Case Number:	CM14-0163717		
Date Assigned:	10/08/2014	Date of Injury:	03/01/2004
Decision Date:	12/16/2014	UR Denial Date:	09/18/2014
Priority:	Standard	Application Received:	10/06/2014

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 Orthopedic Surgery and is licensed to practice in Arizona. 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 64-year-old male with a date of injury of 3/1/2004. A progress note dated 4/28/2014 states that the patient is 6 months status post reverse total shoulder arthroplasty. He has no definite improvement in his range of motion and function with therapy. Examination revealed active elevation of 110, his strength against resisted abduction was 4/5. A supplemental orthopedic report dated 7/1/2014 states the patient has previously undergone a C4-C7 anterior cervical discectomy and fusion and a left reverse total shoulder arthroplasty. He has recently finished his physical therapy for his shoulder arthroplasty which was done on 11/8/2013. Patient felt he was getting some pain relief from his temporomandibular joint (TMJ) symptoms while going to physical therapy but since that has stopped; his neck pain has increased and he feels significant pain and weakness and tightness. He uses Biofreeze and Flector patches and heat in the morning and a transcutaneous electrical nerve stimulation (TENS) unit in the evening for pain relief. A request is made to continue physical therapy 2-3 times a week for another 6-8 weeks.

IMR ISSUES, DECISIONS AND RATIONALES

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

Physical therapy 1-2 times 6-8 weeks to the neck: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Physical Medicine.

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

Decision rationale: The chronic pain guidelines state that passive therapy can provide short-term relief during the early phases of pain treatment. They can be used sparingly with active therapies to help control swelling, pain and inflammation. Active therapies is based on the philosophy that therapeutic exercise and/or activity are beneficial for restoring flexibility, strength, endurance, function, range of motion, and can alleviate discomfort. This form of therapy may require supervision but should be transitioned into an active self-directed home physical medicine program. This patient has just finished a considerable amount of supervised physical therapy to improve the results of his shoulder surgery which was performed over a year ago. The patient still has pain and limitation of motion of the shoulder and has not made significant functional improvement. There is no documentation that the patient is doing an active program of self-directed home physical therapy for his neck. In addition, there seems to be a lack of significant functional improvement of his neck problems. Therefore, without evidence of significant functional improvement, which includes a return to work, decreased medication, decreased reliance on medical treatment, and significant increase in functional activity, the necessity for continuing physical therapy has not been established.