

Case Number:	CM14-0165798		
Date Assigned:	10/13/2014	Date of Injury:	09/23/2012
Decision Date:	11/28/2014	UR Denial Date:	09/26/2014
Priority:	Standard	Application Received:	10/08/2014

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 Preventive Medicine, has a subspecialty in Occupational Medicine and is licensed to practice in Texas. 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 injured worker is a 58 year old female who is reported to have fractured her coccyx when she slipped and fell at work on 09/23/2012. Following the injury, she was placed on off work followed by 4-hours duty in a day. She received 18 sessions of physical therapy between the initial weeks of the injury and 07/2013. The physical therapy provided 50% improvement in her pain control. She is currently working 4-hours shift due to the ongoing pain. She continues to complain of 5/10 low back pain that worsens with prolonged standing. EMG revealed left L4 and S1 radiculopathy, right L5 and S1 radiculopathy; Lumbar MRI of 5/21/13 was normal, while the Lumbar MRI of 08/15/2014 revealed slight annular bulging at L5-S1, and mild disc desiccation at L4-L5. Her physical examination was unremarkable but for mild weakness of the right lowers extremity. The injured worker has been diagnosed of Lumbar sprain/Strain; Sprain /strain sacroiliac; long term (current) use of medications. Other treatments have included Acupuncture, Epidural steroid injections. At dispute is the request for PT 6 visits with focus on core muscle strengthening as well as home exercises.

IMR ISSUES, DECISIONS AND RATIONALES

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

Cont PT 6 visits with focus on core muscle strengthening as well as home exercises: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

Decision rationale: The injured worker sustained a work related injury on 09/23/2012. The medical records provided indicate the diagnosis of Lumbar sprain/Strain; Sprain /strain sacroiliac; long term (current) use of medications. Treatments have included up to 18 physical therapy session until 7/2013, Acupuncture, and Epidural steroid injections. The medical records provided for review do not indicate a medical necessity for Cont PT 6 visits with focus on core muscle strengthening as well as home exercises. The Chronic pain guidelines of the MTUS recommends a fading of treatment frequency (from up to 3 visits per week to 1 or less), plus active self-directed home physical medicine. The guidelines states that active therapy requires an internal effort of the individual to complete a specific exercise or task, and may require supervision from a therapist , medical provider; the patient should be instructed and is expected to continue active therapies at home as an extension of the treatment. Therefore, based on the fact that she had 18 sessions of supervised physical therapy in the past, and the fact that this is a chronic pain condition, motivation and instructions from her provider should be adequate. The requested treatment is not medically necessary.