

Case Number:	CM14-0024203		
Date Assigned:	06/11/2014	Date of Injury:	01/19/2010
Decision Date:	07/15/2014	UR Denial Date:	01/31/2014
Priority:	Standard	Application Received:	02/26/2014

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 Physical Medicine and Rehabilitation has a subspecialty in Neuromuscular Medicine and is licensed to practice in Maryland. 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 43 year old female who has a date of injury 1/19/10. The diagnoses include degeneration of cervical intervertebral disc, brachial neuritis or radiculitis, myalgia and myositis, unspecified. The patient had right shoulder arthroscopy in September of 2010. There is a prospective request for 12 sessions of physical therapy to the cervical spine 2 times a week for 6 weeks. There is a 1/20/14 physician progress report that states that the patient complains of continued cervical muscle spasm. The trigger point injections gave her just about 4 weeks of good pain relief. She also gets headaches that start in the right side of the neck and travel up to her right temporal region. She gets about 5 per month. The number of headaches has been reduced since she has been using a traction collar. The trigger point injections also help. She tried Terocin cream on her neck and she believes it really helped her with her neck pain. A cervical MRI which was performed on 2/28/12 reveals disc degeneration with a broad-based disc bulge at C5-6 and a central protrusion creating moderate spinal canal stenosis. There is a concavity of the thecal sac and spinal cord. At C6-7 there is also disc degeneration with a small central disc protrusion without significant central stenosis. There is no neuroforaminal narrowing at this level. On physical exam there are trigger points identified in the cervical and upper interscapular area. The cervical spine reveals that the range of motion good is in all planes with only mild associated discomfort. The upper extremity grip strength is 5/5 equal and symmetric, sensation to light touch intact, Trigger points identified. The documenting physician states that he will proceed with trigger point injections and will request authorization for physical therapy for cervical spine strengthening. Per documentation submitted, the patient has had 12 physical therapy visits between September - October 2012.

IMR ISSUES, DECISIONS AND RATIONALES

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

PROSPECTIVE REQUEST FOR 12 SESSIONS OF PHYSICAL THERAPY TO THE CERVICAL SPINE, 2 TIMES PER WEEK FOR 6 WEEKS: Upheld

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

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

Decision rationale: MTUS Chronic Pain Medical Treatment Guidelines recommend up to 10 visits for this patient's condition. The patient has already had 12 visits of therapy in the past for the cervical spine without significant improvement. The patient should be well versed in a home exercise program by now. The request for additional therapy is not medically necessary and therefore the prospective request for 12 sessions of physical therapy to the cervical spine 2 times a week for 6 weeks is not medically necessary.