MAXIMUS Federal Services

Case Number:	CM14-0027887		
Date Assigned:	06/20/2014	Date of Injury:	03/13/2013
Decision Date:	11/03/2014	UR Denial Date:	02/17/2014
Priority:	Standard	Application Received:	03/05/2014

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 claimant injured his right knee on 03/13/13. PT for 12 additional postop visits is under review. The claimant is status post meniscectomy and ACL reconstruction on 09/11/13. On 11/25/13, a note stated that he started his postop PT about a month later than expected because of swelling. His recovery was delayed but he was slowly improving. He had an initial evaluation for PT on 10/11/13. 12 visits of therapy were recommended. He had decreased function and decreased range of motion with postop swelling and also had decreased strength and gait impairment. He was not able to return to his job. He was just beginning his therapy status post ACL reconstruction. A note dated 10/22/13 indicated that his knee was doing a lot better but he was complaining of his left knee and left hip being in a lot of pain. He was to continue the ACL brace and stop the crutches. On 01/31/14, continued physical therapy was recommended. He had been attending physical therapy 1-2 times per week for his right knee. It helped temporarily. He reported severe pain that comes and goes. He had return to modified duty. The number of postop PT visits was unknown. He had a PT evaluation on 02/18/14. He reportedly was injured when he slipped and fell. He had postop PT for 1 month postop with increased stiffness that got better over time. He had medial knee stiffness and pain with popping. Range of motion was mildly decreased and his knee was also weak. On 02/20/14, he reported carrying a child up a step and had a little bit of pain in his right knee. He thought his arthritis in his left knee was getting worse. On 05/07/14, he had a medical-legal evaluation. He actually did not show up for it. On 04/04/14, he reported that he fell when his right knee gave way on 03/14/14 and he injured his right shoulder. He wanted an MRI of the shoulder. He still had pain in his right knee. He was still attending physical therapy. He was advised to continue his exercises for his right knee.

IMR ISSUES, DECISIONS AND RATIONALES

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

Physical Therapy 2x6: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints,Postsurgical Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) - ODG Physical Therapy Guidelines

MAXIMUS guideline: Decision based on MTUS Postsurgical Treatment Guidelines Page(s): 23.

Decision rationale: The history and documentation do not objectively support the request for an additional 12 postop PT visits. The MTUS recommend "sprains and strains of knee and leg; cruciate ligament of knee (ACL tear) (ICD9 844; 844.2): Postsurgical treatment: (ACL repair): 24 visits over 16 weeks. Postsurgical physical medicine treatment period: 6 months." In this case, the claimant underwent meniscectomy and ACL reconstruction on 09/11/13 and started his postop PT on 10/11/13. Twelve visits were recommended. On 01/31/14, the provider's note state he "had been attending physical therapy 1-2 times per week for his right knee." The total number of visits attended is not stated. It would appear, however, that he had completed postop PT for what should have been a sufficient number of visits (beginning on 10/11/13 and through 01/31/14) and there is no clinical evidence that he remained unable to continue and complete his rehab with an independent HEP. There is no indication that continuation of supervised exercises is likely to provide him with significant or sustained benefit that he cannot achieve on his own. The medical necessity of this request for 12 additional postop PT visits has not been clearly demonstrated based on the submitted records.