

Case Number:	CM14-0040955		
Date Assigned:	06/30/2014	Date of Injury:	12/07/2012
Decision Date:	08/20/2014	UR Denial Date:	03/25/2014
Priority:	Standard	Application Received:	04/08/2014

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 Orthopedic Surgery 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:

This is a 52 year old male who sustained a vocational injury on 12/07/12 when he was loading a glass panel. The claimant underwent a left carpal tunnel release, a left radial tunnel release, with long arm splinting on 02/08/04. There are no post-operative office notes available for review. The current request is for occupational therapy three times a week for four weeks for a total of twelve sessions.

IMR ISSUES, DECISIONS AND RATIONALES

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

Occupational therapy three time a week for four weeks (12 sessions): Upheld

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

MAXIMUS guideline: Decision based on MTUS Postsurgical Treatment Guidelines.

Decision rationale: Post-Surgical Treatment Guidelines do not support the request for occupational therapy three times a week for four weeks. The medical records do not clarify the amount of post-operative occupational therapy that the claimant has undertaken which would be crucial to know, prior to considered medical necessity. In addition, the medical records do state that this is the initial request for occupational therapy following surgery. The Post-Surgical Guidelines recommend three to eight sessions of therapy over a three month period of time. This

request exceeds the Post-Surgical standard recommendation for therapy and therefore, cannot be supported as medically necessary.