

Case Number:	CM14-0054096		
Date Assigned:	07/07/2014	Date of Injury:	11/21/2011
Decision Date:	08/06/2014	UR Denial Date:	04/09/2014
Priority:	Standard	Application Received:	04/23/2014

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 26-year-old with a work injury dated 1/21/11. This was a cumulative trauma injury that the patient received while performing his usual and customary duties as a night auditor. The diagnoses include musculoligamentous strain/sprain of the forearms, elbows, wrists, and hands; early tarsal tunnel syndrome, left elbow with mild ulnar neuropathy early carpal tunnel syndrome, right hand. The patient had chronic pain and was referred to a functional restoration program that he participated in for 6 weeks. There is a request for the medical necessity of a transitional step down program, quantity 8. From a functional standpoint, the patient's lifting, carrying, pulling and pushing capacities increased on a weekly basis. His DASH (disabilities of the arm, shoulder, and hand) score was 48% at the start of the functional restoration program and 40% at the week of discharge. The patient reported that overall, he feels 80% better than prior to starting the program. He reports that he feels good and he is not as limited as before. He feels that he has learned how to pace his activities in order to avoid flare-ups and that he is now able to tolerate certain uncomfortable sensations without becoming fearful that it will turn into bad pain. His Beck Depression score decreased from 12 to 5. He was not on any opiates when he started the program and he maintains the desire not to add any new medications. He decreased his dose of Gabapentin from 600mg two times per day (bid) to 300mg two times per day (bid). The physical therapy notes indicate he has increased his upper extremity range of motion, strength, power, endurance, gait pattern and activities of daily living. The documentation indicates that the patient has exceeded the expectations of the program and has participated in the full 6-week course. From a functional standpoint, the patient's lifting, carrying, pulling and pushing capacities increased on a weekly basis.

IMR ISSUES, DECISIONS AND RATIONALES

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

Transitional Step Down Program, QTY: 8.00: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Functional Restoration Programs.

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines, Chronic Pain Treatment Guidelines Chronic Pain Programs (Functional Restoration Programs) Page(s): 30, 32.

Decision rationale: A transitional step down program quantity 8 is not medically necessary per the MTUS Chronic Pain Medical Treatment Guidelines. The guidelines state that for functional restoration programs treatment duration in excess of 20 sessions requires a clear rationale for the specified extension and reasonable goals to be achieved. The documentation indicates that the patient has already participated in excess of 20 sessions. (He has had 30 sessions or 6 weeks). The documentation does not indicate that he is on opioid medication. The documentation indicates he is independent in a home exercise program and feels competent in psychological pain coping strategies. The request for a transitional step down program, quantity 8 is not medically necessary.