

Case Number:	CM14-0072651		
Date Assigned:	07/16/2014	Date of Injury:	06/25/2006
Decision Date:	10/08/2014	UR Denial Date:	04/18/2014
Priority:	Standard	Application Received:	05/20/2014

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 & Rehabilitation 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 patient is a 61-year-old female who has submitted a claim for status post industrial left elbow injury (08/25/2006) and status post open exploration and debridement, ECRB/ECRL with repair (10/23/2013) associated with an industrial injury date of 06/25/2006. Medical records from 02/23/2012 to 04/18/2014 were reviewed and showed that patient has improved motion at her elbow. Physical examination revealed mild tenderness to palpation, excellent wound healing, no signs of infection, full elbow flexion and extension ROM, elbow pronation at 60 degrees and supination at 80 degrees. Of note, the most recent functional capacity evaluation stated that the patient has reached maximum medical improvement (04/17/2014). Treatment to date has included left elbow exploration and debridement, lateral epicondylitis, excision of osteophyte, repair of ECRB/ ECRL (10/23/2013), 24 sessions of postoperative physical therapy, and pain medications such as Norco. Of note, there was no documentation of functional outcome from previous physical therapy visits. Utilization review dated 04/16/2014 denied the request for PT to the left elbow 2 x6 because the patient was capable of converting to a self-directed home exercise program.

IMR ISSUES, DECISIONS AND RATIONALES

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

Physical Therapy to the left elbow 2 times a week for 6 weeks: Upheld

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

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

Decision rationale: According to pages 98-99 of the CA MTUS Chronic Pain Medical Treatment Guidelines, active therapy is recommended for restoring flexibility, strength, endurance, function, range of motion, and can alleviate discomfort. Patients are instructed and expected to continue active therapies at home as an extension of the treatment process in order to maintain improvement levels. Physical medicine guidelines allow for fading of treatment frequency from up to 3 visits per week to 1 or less plus active self-directed home physical medicine. CA MTUS Post-Surgical Treatment Guidelines recommend 10 visits of postoperative physical therapy over 4 weeks for ECR/ECRL repair. In this case, the patient has already completed 24 visits of postoperative physical therapy which exceeded guidelines recommendation. There was no documentation of functional outcome from previous physical therapy visits. The most recent functional capacity evaluation revealed that patient has achieved maximum medical improvement (04/17/2014). It is unclear as to why the patient cannot self-transition into HEP. Therefore, the request for Physical Therapy to the left elbow 2 times a week for 6 weeks is not medically necessary.