

Case Number:	CM14-0087356		
Date Assigned:	07/23/2014	Date of Injury:	08/09/2010
Decision Date:	09/16/2014	UR Denial Date:	06/10/2014
Priority:	Standard	Application Received:	06/10/2014

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 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 43-year-old female who sustained an industrial injury on 8/9/2010. The mechanism of injury is not provided. She is status post L4-L5 global arthrodesis on 1/31/2013 and 2/1/2013. The patient was seen for follow-up evaluation on 5/22/2014. She reports her pain is equal in the back and legs. The radiating leg pain is equal in the right and left. Overall, the pain is 80% in the back and 20% in the legs. She takes 2 Norco a day, and has been using tens unit with relief. Physical examination reveals standing. Range of motion was 90, seated straight leg raise on the right is 80, and on the left. Heel walking, toe walking, and heel to toe rising is normal, tandem is normal, and gait is normal. Reflexes are 2 at the knees and 1-2+ at the ankles. Motor exam is 5/5, and sensory shows right L4-5 dermatomal sensory loss. Assessment: 1. Status post L4-50 arthrodesis 2. L5-S1. Disc bulge with facet arthrosis on recent MRI - nonsurgical at present. 3. Recent left shoulder injury after fall. Recommendations are for aquatic therapy 2 times daily for 6 weeks and 1 physical therapy visit for the development of home exercise program. Feldene 10mg #60 was prescribed. Work status remains TTD.

IMR ISSUES, DECISIONS AND RATIONALES

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

(1) Visit at Physical Therapy for the Development of Home Exercise Program due to Lumbar Spine Injury as an Outpatient: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 288, 299.

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

Decision rationale: According to the guidelines, exercise activities are recommended. Patients are instructed and expected to continue active therapies at home as an extension of the treatment process in order to maintain improvement levels. The use of active treatment modalities (e.g., exercise, education, activity modification) instead of passive treatments is associated with substantially better clinical outcomes. The patient has been undergoing care for an industrial injury sustained more than 4 years ago, and is more than 1 1/2 years status post lumbar fusion surgery. Given the remote date of injury and prior surgery, the patient's past medical history would have included extensive supervised physical therapy. The medical records do not provide physical therapy progress reports, there is no documentation pertaining to the patient's response to previous courses of physical therapy. At this juncture, the patient should be exceedingly well-versed in an independent home exercise program, which she should be utilizing on a routine or daily basis to maintain activity and functional levels. The medical necessity for the requested physical therapy visit is not been established, based on the medical records provided.