

<b>Case Number:</b>	CM14-0093548		
<b>Date Assigned:</b>	07/30/2014	<b>Date of Injury:</b>	07/17/2012
<b>Decision Date:</b>	09/26/2014	<b>UR Denial Date:</b>	06/06/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/19/2014

### 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 applicant is a represented [REDACTED] employee who has filed a claim for chronic knee pain and knee arthritis reportedly associated with an industrial injury of July 17, 2012. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representation; viscosupplementation injections in July 2013; earlier knee arthroscopy on October 24, 2012; subsequent knee surgery on April 4, 2014; and 12 sessions of postoperative physical therapy, per the claims administrator. In a utilization review report dated June 6, 2014, the claims administrator denied a request for 12 sessions of physical therapy. The claims administrator stated that he could not approve the request without a successful teleconference with the attending provider. The claims administrator did acknowledge that the applicant had residual knee impairment but suggested that the applicant try to perform home exercises. The applicant's attorney subsequently appealed. On May 27, 2014, the applicant was described as status post revision knee arthroscopy on April 4, 2014. The applicant reported persistent complaints of knee pain secondary to residual knee arthritis. Knee range of motion of -3 to 100 degrees was noted. Twelve additional sessions of physical therapy were endorsed but the applicant was placed off work, on total temporary disability. The attending provider posited that the applicant was improving with earlier treatment but did not elaborate how the applicant had improved. In a physical therapy progress note dated April 18, 2014, it was acknowledged that the applicant had medium physical demand level occupation as a gardener and was reportedly intent on returning to the same.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Post Op Physical Therapy 2x6wks:** Overturned

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

**MAXIMUS guideline:** Decision based on MTUS Postsurgical Treatment Guidelines.

**Decision rationale:** The Expert Reviewer based his/her decision on the MTUS Postsurgical Treatment Guidelines, Knee Meniscectomy Surgery. The Expert Reviewer's decision rationale: While this does result in extension of treatment beyond the 12-session course recommended in MTUS following an arthroscopic knee surgery, as apparently transpired here, this recommendation is qualified by commentary in MTUS guidelines to the effect that the medical necessity for postsurgical physical medicine is contingent on a variety of applicant-specific factors. These factors may include; comorbid medical conditions, prior pathology involving the injured body part, prior surgeries involving the injured body part, and an applicant's essential work functions. In this case, the applicant does have a history of previous surgery involving the injured knee. The applicant does have issues with arthritis involving the injured knee, which are apparently impeding and delaying his recovery. The applicant has more arduous physical job demands as a gardener. Obtaining additional physical therapy on the order of that proposed is therefore indicated, given the variety of applicant-specific factors and comorbidities reportedly present here. Therefore, the request is medically necessary.