

Case Number:	CM14-0186034		
Date Assigned:	11/13/2014	Date of Injury:	12/21/2012
Decision Date:	01/07/2015	UR Denial Date:	10/10/2014
Priority:	Standard	Application Received:	11/07/2014

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 New York. 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 42 year old male who suffered an industrial related injury on 12/21/12. The treating physician's report dated 4/8/14 noted the injured worker had complaints of bilateral knee pain. The physical examination revealed right knee tenderness in the medial joint line with no gross effusion. The injured worker was noted to be grossly distally neurovascularly intact with no ligamentous instability. The diagnoses included right knee status post partial meniscectomy with continued pain and left knee possible internal derangement. A MRI of the right knee done on 6/25/14 revealed suspicion of post-surgical change of the posterior horn of the medial meniscus with adjacent longitudinal horizontal fluid signal at the junction of the posterior horn and posterior root ligament concerning for re-tear. A lateral meniscus radial free-edge tear of the anterior aspect of the body was seen. Semimembranosus tendon low grade interstitial tearing near the tibial attachment. The treating physician's report dated 9/24/14 noted continued right knee pain. Physical examination findings included a positive McMurray sign. The diagnoses included right knee recurrent meniscus tear and left knee possible internal derangement. The physician recommended a right knee arthroscopy with partial medial meniscectomy. On 10/10/14 the utilization review (UR) physician modified the request for 12 postoperative physical therapy treatments for the right knee. The UR physician noted 12 physical therapy sessions exceeded the Medical Treatment Utilization Schedule guideline recommendations and that 6 sessions would be appropriate for an initial course of therapy.

IMR ISSUES, DECISIONS AND RATIONALES

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

12 Post-Operative Physical Therapy Sessions to the Right Knee (2x6): Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 343-345. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Treatment Index, 12th Edition (web0, 2014 Knee & Leg Meniscectomy);

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Knee Pain Chapter.

Decision rationale: 12 physical therapy sessions exceed the Medical Treatment Utilization Schedule guideline recommendations and that 6 sessions would be appropriate for an initial course of therapy. In addition, guidelines indicate that this should be documented improvement with a short course of postoperative physical therapy before additional physical therapy is approved. 12 sessions a postoperative physical therapy for knee surgery in this case is excessive and does not meet guidelines. A short course of physical therapy with documented improvement prior to approval additional physical therapy is necessary. The request for 12 Post-Operative Physical Therapy Sessions is not medically necessary.