

Case Number:	CM14-0188922		
Date Assigned:	11/19/2014	Date of Injury:	03/25/2009
Decision Date:	01/20/2015	UR Denial Date:	10/16/2014
Priority:	Standard	Application Received:	11/12/2014

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:

In a Utilization Review Report dated October 16, 2014, the claims administrator denied a request for 12 sessions of physical therapy, denied an interferential unit purchase, and approved urine toxicology testing. The claims administrator suggested that its decision was based on a progress note of August 20, 2014 and an earlier UR report of September 2, 2014. The progress note, it is incidentally noted, was not summarized or discussed by the claims administrator in the UR report. The applicant's attorney subsequently appealed. However, no clinical progress notes were incorporated into the Independent Medical Review packet, either by the applicant's attorney or by the claims administrator.

IMR ISSUES, DECISIONS AND RATIONALES

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

Physical therapy 3 x 4 for the cervical spine, left elbow and right shoulder: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Physical Medicine Page(s): 99, 8.

Decision rationale: The 12-session course of treatment proposed, in and of itself represents treatment in excess of the 9- to 10-session course recommended on page 99 of the MTUS

Chronic Pain Medical Treatment Guidelines for myalgias and myositis of various body parts, the diagnosis reportedly present here. No clear or compelling rationale for treatment in excess of MTUS parameters was outlined by the attending provider, although it is acknowledge that the August 25, 2014 progress note on which the article in question was sought was seemingly not incorporated into the Independent Medical Review packet. The information which is on file, however, failed to support or substantiate the request, particularly in light of the fact that page 8 of the MTUS Chronic Pain Medical Treatment Guidelines stipulates that there must be demonstration of functional improvement at various milestones in the treatment program in order to justify continued treatment. Here, the applicant's response to previous physical therapy treatment was not clearly outlined. Therefore, the request is not medically necessary.

Interferential unit for purchase: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Interferential Current Stimulation (ICS) Page(s): 118.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Interferential Current Stimulation Page(s): 120.

Decision rationale: As noted on page 120 of the MTUS Chronic Pain Medical Treatment Guidelines, a purchase of an interferential current stimulator device should be predicated on evidence of a favorable outcome during a preceding one-month trial of the same, in terms of increased functional improvement, less reported pain, and evidence of medication reduction. In this case, however, the admittedly limited information on file, which did not include the August 25, 2014 progress note on which the article in question was sought, failed to outline evidence of a favorable outcome during an earlier one-month trial of the article at issue. Therefore, the request is not medically necessary.