

<b>Case Number:</b>	CM14-0199138		
<b>Date Assigned:</b>	12/09/2014	<b>Date of Injury:</b>	10/01/2009
<b>Decision Date:</b>	01/21/2015	<b>UR Denial Date:</b>	11/12/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/26/2014

### 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 Family 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 injured worker is a 40 year old female who sustained a work related injury October 1, 2009. At that time, she was treated for a right knee sprain/strain with medication, knee brace, physical therapy and return to work with restrictions of kneeling and squatting. In a qualified medical review performed June 20, 2014, the physician documents the injured worker is 5 feet 4 inches tall and weighs 257 pounds. Physical examination within normal limits with no edema of the lower extremities and 2+ peripheral pulses. The impression is documented as; exogenous obesity and right knee pain with no demonstrable adverse anatomy by MRI (report not present in case file). In a supplemental report, dated September 10, 2014, the physician documents an MRI and x-ray dated June 26, 2014, reveals mild degenerative changes in medial and lateral menisci with some joint fluid. He further stated, the x-ray was not weight bearing and recommended the AP view of both knees be done standing, to determine cartilage interval. These films showed she was bone on bone and changed recommendations of further medical care, a possible joint replacement, but would need to lose approximately 40 pounds. There are no x-ray reports or MRI reports present in this case file and no current physician's progress reports or current requests for authorization present for review. According to utilization review performed November 12, 2014, the request for a follow-up appointment, in 4-6 weeks, is medically necessary and certified. The request for urine toxicology test is non-certified. According to MTUS Guidelines, the medical records are unclear to the injured workers risk level assessment, which would determine the frequency of testing. Previous urine test has been documented without incorporating these test results in the claimants care. The request for range of motion to the low back is non-certified as no rationale is provided to support this testing. Furthermore, any MD should be able to perform a basic physical exam of the musculoskeletal system using a goniometer, dynamometer, and other analog testing methods.

## IMR ISSUES, DECISIONS AND RATIONALES

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

**Urine Toxicology Test:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Urine Toxicology Page(s): 82-92.

**Decision rationale:** According to the California MTUS Chronic Pain Treatment Guidelines, urine toxicology screen is used to assess presence of illicit drugs or to monitor adherence to prescription medication program. There's no documentation from the provider to suggest that there was illicit drug use or noncompliance. There were no prior urine drug screen results that indicated noncompliance, substance-abuse or other inappropriate activity. Based on the above references and clinical history, a urine toxicology screen is not medically necessary.

**Range of Motion:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Physical Medicine Page(s): 82-92. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Range of motion and flexibility

**Decision rationale:** According to the MTUS guidelines, therapy is recommended in a fading frequency. They allow for fading of treatment frequency (from up to 3 visits per week to 1 or less), plus active self-directed home Physical Medicine. In this case, there is no indication that range of motion would require a physician or therapist. There is no indication on the length of intervention or any reason this cannot be done at home. The relation between lumbar range of motion measures and functional ability is weak or nonexistent. This has implications for clinical practice as it relates to disability determination for patients with chronic low back pain, and perhaps for the current impairment guidelines of the American Medical Association. The value of the sit-and-reach test as an indicator of previous back discomfort is questionable. The request for Range of Motion is not medically necessary.

**Follow Up 4-6:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG, Low Back Chapter

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Follow-Up Visits

**Decision rationale:** According to the ODG guidelines, follow-ups are recommended as medically necessary. Due to the claimant's ongoing symptoms and diagnoses, a follow-up is reasonable and medically necessary in 4-6 weeks.