

Case Number:	CM14-0200072		
Date Assigned:	12/10/2014	Date of Injury:	12/09/2006
Decision Date:	05/05/2015	UR Denial Date:	11/13/2014
Priority:	Standard	Application Received:	12/01/2014

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: California

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Pain Management

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 66 year old male, who sustained an industrial injury on December 9, 2006. The injured worker was diagnosed as having chronic low back pain status post lumbar revision surgery in 2012, with updated MRI on April 23, 2012 showing a solid fusion and instrumentation from L1 through S1 with collapsed disk at L4-L5, and distant history of left ankle fracture with weak dorsiflexion. Treatment to date has included lumbar surgeries, lumbar spine MRI, aquatic therapy, cortisone injection in the knees, Synvisc injections, and medication. Currently, the injured worker complains of low back and left greater than right knee pain. The Primary Treating Physician's report dated October 28, 2014, noted the injured worker reported having a flare-up of his pain a few weeks prior. The injured worker was noted to use a cane for ambulation, and a wheeled walker for distances. The injured worker reported his medications continued to help with the pain, reducing the pain level from an 8/10 at times to about a 3/10. The injured worker's current medications were listed as Norco, Gabapentin, Colace, Losartan, Metoprolol, Metformin, and Hydrochlorothiazide. Physical examination was noted to show tenderness across the joint line of the knees bilaterally. The treatment plan was noted to include dispensing a two-month supply of Norco and Neurontin, with a prescription for Colace, and a request for authorization for a short course of aquatic therapy in a heated pool.

IMR ISSUES, DECISIONS AND RATIONALES

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

Short course of aquatic therapy in a heated pool with an instructor; 6 sessions: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Aquatic Therapy, Physical Medicine Page(s): (s) 22, 99. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back, Physical Therapy.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines 8 C.C.R. 9792.20 - 9792.26 MTUS (Effective July 18, 2009) Page(s): 22, 98-99 of 127.

Decision rationale: Regarding the request for aquatic therapy, Chronic Pain Treatment Guidelines state that aquatic therapy is recommended as an optional form of exercise therapy where available as an alternative to land-based physical therapy. They go on to state that it is specifically recommended whenever reduced weight bearing is desirable, for example extreme obesity. Within the documentation available for review, there is no documentation indicating why the patient would require therapy in a reduced weight-bearing environment rather than a land-based therapy/independent home exercise program. In the absence of clarity regarding those issues, the currently requested aquatic therapy is not medically necessary.