

Case Number:	CM14-0202960		
Date Assigned:	12/15/2014	Date of Injury:	01/08/2013
Decision Date:	02/04/2015	UR Denial Date:	11/18/2014
Priority:	Standard	Application Received:	12/03/2014

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 Physical Medicine and Rehabilitation, has a subspecialty in Neuromuscular Medicine and is licensed to practice in Maryland. 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 patient is a 56 year old female. Her diagnoses include lumbar disc degeneration with neurological issues; spinal stenosis; cervical radiculopathy. Under consideration is a request for physical therapy two times a week for four weeks for the cervical spine QTY: 8.00 There is a 12/11/14 progress note that states that the patient has weakness, decreased sensation, motor function and balance difficulties. There is a request for authorization for an anterior cervical discectomy and fusion at C5-6 and C6-7 with post op in home physical therapy. A 10/13/14 progress report states that the patient is status post epidural injection September 30, 2014. She feels better. She had some diarrhea. She has some numbness in the bilateral lower extremities. She has improved with the shot. She is going to see a neurologist. She has ataxia and balance issues. She is not myelopathic, but she really has some balance issues. A neurology evaluation is scheduled for October 28, 2014. As far as her pain, she is much better after the shot, but she still has some GI issues. She doesn't have deep venous thrombosis on her recent duplex. Physical examination shows a well-developed, well-nourished female in no acute distress. Spinal examination shows pain with extension and rotation. No focal deficits. 5/5 motor examination. There is decreased range of motion. She has an antalgic gait and is ataxic. She has non-specific symptomatology neurologically. The treatment plan requests authorization for physical therapy two times a week for four weeks for the cervical spine. The patient is temporarily totally disabled. The patient had an MRI in July, 2014 that showed a large disc extrusion at C5-6 with moderate central canal stenosis and indentation of the spinal cord and a smaller disc protrusion at C6-7 without significant stenosis.

IMR ISSUES, DECISIONS AND RATIONALES

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

Physical therapy two times a week for four weeks for the cervical spine QTY: 8.00: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Physical medicine Page(s): 98-99.

Decision rationale: Physical therapy two times a week for four weeks for the cervical spine QTY: 8.00 is not medically necessary per the MTUS Chronic Pain Medical Treatment Guidelines. The guideline recommend up to 10 visits for this condition. The documentation indicates that the patient had 14 visits in June 2014 without significant evidence of functional improvement. The patient should be well versed in a home exercise program now. The request for 8 more supervised therapy visits is not medically necessary.