

<b>Case Number:</b>	CM14-0060734		
<b>Date Assigned:</b>	07/09/2014	<b>Date of Injury:</b>	03/20/2006
<b>Decision Date:</b>	02/17/2015	<b>UR Denial Date:</b>	04/25/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	05/01/2014

### 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. The expert reviewer is Board Certified 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 applicant is a represented [REDACTED] employee who has filed a claim for chronic shoulder pain reportedly associated with an industrial injury of March 20, 2006. In a Utilization Review Report dated April 25, 2014, the claims administrator failed to approve a request for 18 sessions of physical therapy. The claims administrator referenced progress notes of January 24, 2014, March 20, 2014, and March 25, 2014 in its denial. The claims administrator invoked both MTUS and non-MTUS guidelines. It was stated that the applicant had undergone manipulation under anesthesia surgery on July 25, 2013. The claims administrator invoked non-MTUS ODG guidelines in its determination. The applicant's attorney subsequently appealed. In an operative report dated July 25, 2013, the applicant underwent a manipulation under anesthesia surgery, diagnostic arthroscopy, and operative arthroscopy to ameliorate a preoperative diagnosis of severe painful impingement syndrome. In a handwritten note dated June 27, 2013, it was stated that the applicant had retired. The applicant was using Naprosyn and Tylenol for pain relief. The applicant was 69 years old, it was stated. The most recent progress note incorporated into the Independent Medical Review packet was a handwritten note dated November 5, 2013, difficult to follow, not entirely legible, on which 18 sessions of physical therapy were endorsed. It was stated that the applicant was pending a right shoulder arthroscopy. The applicant had retired, it was again stated. The box "off work" was, however, checked.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Additional Physical Therapy sessions three (3) times six (6) for bilateral shoulders: Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Physical Medicine Guidelines Page(s): 99. Decision based on Non-MTUS Citation Official Disability Guidelines Shoulder (updated 03/30/2014)

**MAXIMUS guideline:** Decision based on MTUS Postsurgical Treatment Guidelines.

**Decision rationale:** Based on the information on file, the request in question was seemingly initiated via a handwritten note of November 5, 2013, following earlier arthroscopic shoulder surgery and examination under anesthesia surgery of July 25, 2013. The applicant, per the claims administrator, had had prior treatment (28 sessions), seemingly in excess of the 24-session course endorsed in the MTUS Postsurgical Treatment Guidelines following arthroscopic shoulder surgery for impingement syndrome, as apparently transpired here. MTUS 9792.24.3.c.4 further stipulates that the frequency of visits shall be gradually reduced or discontinued as an applicant gains independence in management of symptoms and with achievement of functional goals. Here, however, the handwritten note of November 5, 2013 did not set forth a compelling case for such a lengthy course of physical therapy on or around the four-month mark of the date of surgery. It is not clear why such a protracted course of physical therapy was sought relatively late in the six- month postsurgical physical medicine treatment period established in MTUS 9792.24.3 following earlier arthroscopic shoulder surgery, as transpired here. The attending provider's handwritten progress note did not contain much in the way of applicant-specific rationale or narrative commentary which would support such a lengthy, protracted course of treatment. Therefore, the request is not medically necessary.