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| Case Number: | CM15-0103148 | | |
| Date Assigned: | 06/05/2015 | Date of Injury: | 11/14/2007 |
| Decision Date: | 07/07/2015 | UR Denial Date: | 05/18/2015 |
| Priority: | Standard | Application Received: | 05/28/2015 |

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: Maryland

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

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 64-year-old male, who sustained an industrial injury on 11/14/07. The injured worker was diagnosed as having degeneration of the lumbar/lumbosacral disc, lumbar disc displacement without myelopathy, disorders of the sacrum, and sciatica. Treatment to date has included a functional restoration program, acupuncture, previous aquatic therapy, home exercise including the use of a pool, and medication including Fentanyl patches. A physician's report dated 3/31/15 noted Fentanyl patches reduced pain from 8-9/10 to 2-3/10. The injured worker had been using Fentanyl patches since at least 12/4/14. Currently, the injured worker complains of low back pain with radiation to the left leg. The treating physician requested authorization for aquatic therapy x 12 sessions and Fentanyl patches 25mcg/hour #10.

IMR ISSUES, DECISIONS AND RATIONALES

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

Aquatic Therapy 12 sessions: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Physical medicine Page(s): 98-99. Decision based on Non-MTUS Citation http://www.nhlbi.nih.gov/health/educational/lose_wt/BMI/bmicalc.htm.

Decision rationale: Aquatic Therapy 12 sessions is not medically necessary per the MTUS Chronic Pain Medical Treatment Guidelines. The MTUS recommends up to 10 visits for this condition. The request exceeds this recommended number of visits. The MTUS recommends aquatic therapy (including swimming) where reduced weight bearing is desirable, for example extreme obesity. The MTUS encourages a transition from supervised therapy to an independent home exercise program. The documentation indicates that the patient has a body mass index that is in the overweight category per the NIH body mass index calculator therefore this patient does not have extreme obesity. The patient should be independent in an independent home exercise program. The request for 12 supervised aquatic therapy sessions is not medically necessary.

Fentanyl patches 25 mcg/hour #10: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Ongoing management Page(s): 78-80.

Decision rationale: Fentanyl patches 25 mcg/hour #10 are not medically necessary per the MTUS Chronic Pain Medical Treatment Guidelines. The MTUS states that a satisfactory response to treatment may be indicated by the patient's decreased pain, increased level of function, or improved quality of life. The MTUS does not support ongoing opioid use without improvement in function or pain. The documentation is inconsistent with the patient's level of functional improvement on Fentanyl. The documentation dated 4/28/15 states that the patient cannot walk more than a few steps without having to stop and rest due to pain but also states that the Fentanyl patch helps him walk and stand 10-15 minutes longer at a time. The documentation reveals that the patient has been on long term opioids without significant evidence of increase in function therefore the request for continued Fentanyl patches is not medically necessary.