

Case Number:	CM15-0108914		
Date Assigned:	06/15/2015	Date of Injury:	09/26/2014
Decision Date:	07/14/2015	UR Denial Date:	05/22/2015
Priority:	Standard	Application Received:	06/05/2015

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: California, Indiana, New York
Certification(s)/Specialty: Internal 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 67-year-old male, who sustained an industrial injury on 9/26/2014. He reported dislocating his right ankle due to falling. Diagnoses have included right ankle fracture. Treatment to date has included surgery and medication. According to the progress report dated 5/4/2015, the injured worker was seen for evaluation of a right ankle fracture with post-operative infection. Exam of the right ankle revealed swelling and tenderness. The injured worker was to be seen by a specialist for evaluation for hardware removal. Authorization was requested for post-operative physical therapy three times a week for four weeks for the right ankle. The initial therapy evaluation dated 5/14/2015 documented that the injured worker complained of weakness and instability of the right ankle as well as stiffness. Treatment on that date consisted of ice packs to the right ankle, soft tissue massage and mobilization for swelling, inflammation and edema.

IMR ISSUES, DECISIONS AND RATIONALES

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

Post-operative physical therapy 3 times a week for 4 weeks for the right ankle: Upheld

Claims Administrator guideline: Decision based on MTUS Postsurgical Treatment Guidelines Page(s): 12-13.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Ankle section, Physical therapy.

Decision rationale: Pursuant to the Chronic Pain Medical Treatment Guidelines and the Official Disability Guidelines, postoperative physical therapy three times per week times four weeks to the right ankle is not medically necessary. Patients should be formally assessed after a six visit clinical trial to see if the patient is moving in a positive direction, no direction or negative direction (prior to continuing with physical therapy). When treatment duration and/or number of visits exceed the guideline, exceptional factors should be noted. The ACOEM recommends surgical intervention for the ankle for patients who have failed to respond to conservative treatment and have signs and symptoms consistent with pathology identified on an imaging study. In this case, the injured workers working diagnoses are status post right ankle fracture open reduction internal fixation times to; postoperative infection; and diabetes mellitus on Janumet. The documentation indicates the injured worker's fracture is healing. The May 4, 2015 progress note states the x-ray shows good healing, hardware in place. The utilization review states the anticipated surgery is not medically necessary. The ankle surgery is not medically necessary and, consequently, the postoperative physical therapy is not medically necessary. Consequently, absent clinical documentation with authorization for ankle surgery, postoperative physical therapy three times per week times four weeks to the right ankle is not medically necessary.