

Case Number:	CM15-0131743		
Date Assigned:	07/20/2015	Date of Injury:	03/07/2005
Decision Date:	08/25/2015	UR Denial Date:	06/25/2015
Priority:	Standard	Application Received:	07/08/2015

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

Certification(s)/Specialty: Preventive Medicine, Occupational 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 65 year old male who sustained an industrial injury on 3-7-05. The diagnosis is bilateral knee degenerative joint disease. In a primary treating physician's progress report dated 6-19-15, the physician notes the injured worker has bilateral knee complaints since 3-7-2005. The pain is sharp and burning with numbness under his knee cap. He reports inflammation of the right knee and increased pain when transitioning from sitting to standing. Pain is rated at 8 out of 10. He reports he has been trying to walk 15 minutes a day. He reports constant aching pain of his left knee which radiates up to his hip and his left knee pops when he walks. The left knee will give out on him when he is walking. Left knee pain is rated at 7 out of 10. Right knee flexion is 90 degrees and extension is -5 degrees. Left knee flexion is 90 degrees and extension is -5 degrees. He is not currently working. He has had 6 sessions of physical therapy with 25% relief and increased range of motion. Current medications are Tramadol and Capsaicin cream. In a primary treating physician's progress report dated 5-26-15, the physician notes the injured worker had 6 sessions of physical therapy for the knees with good relief and he states it increased his mobility in the knee and hip. He also reports increased strength in the legs. The requested treatment is additional physical therapy 2 times a week for 6 weeks for bilateral knees.

IMR ISSUES, DECISIONS AND RATIONALES

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

Additional physical therapy 2 times a week for 6 weeks for bilateral knees: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines physical medicine Page(s): 98-99.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Physical Medicine Section Page(s): 98, 99.

Decision rationale: The MTUS Guidelines recommend physical therapy focused on active therapy to restore flexibility, strength, endurance, function, range of motion and alleviate discomfort. The MTUS Guidelines support physical therapy that is providing a documented benefit. Physical therapy should be provided at a decreasing frequency (from up to 3 visits per week to 1 or less) as the guided therapy becomes replaced by a self-directed home exercise program. The physical medicine guidelines recommend myalgia and myositis, unspecified, receive 9-10 visits over 8 weeks. In this case, the injured worker has completed 6 physical therapy sessions and is involved in a home therapy program. The request for 12 additional physical therapy sessions exceeds the recommendations of the established guidelines, therefore, the request for additional physical therapy 2 times a week for 6 weeks for bilateral knees is determined to not be medically necessary.