

Case Number:	CM15-0137994		
Date Assigned:	08/21/2015	Date of Injury:	01/23/2012
Decision Date:	09/22/2015	UR Denial Date:	07/06/2015
Priority:	Standard	Application Received:	07/16/2015

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: Illinois, California, Texas
 Certification(s)/Specialty: Orthopedic Surgery

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This injured worker is a 61-year-old male who sustained an industrial injury on 1/23/12. Injury occurred when he was forcefully struck the top of his head on a swamp cooler, causing him to fall onto his back. He underwent C4-C7 anterior cervical discectomy and fusion on 4/4/12, and bilateral C5-C7 posterior foraminotomies on 4/23/15. The 6/5/15 treating physician report documented a second post-op evaluation. He complained of continued 4-9/10 neck pain. Physical exam documented a well-healed posterior incision. The treatment plan recommended continued medication, and documented pain medication management. The injured worker was reported doing well post-operatively and was ready to begin post-op physical therapy. He was to continue his current medications through the physical therapy process and then weaning would be considered. Authorization was requested for post-operative physical therapy 3 times a week for 6 weeks for the cervical spine. The 7/6/15 utilization review modified this request for 18 post-op physical therapy visits to 16 visits consistent with the recommended general course of post-op treatment.

IMR ISSUES, DECISIONS AND RATIONALES

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

Post-op physical therapy 3x a week for 6 weeks for the cervical spine: Upheld

Claims Administrator guideline: Decision based on MTUS Postsurgical Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Neck & Upper Back Chapter.

MAXIMUS guideline: Decision based on MTUS Postsurgical Treatment Guidelines
Page(s): 26.

Decision rationale: The California Post-Surgical Treatment Guidelines for surgical treatment of cervical foraminotomy suggest a general course of 16 post-operative physical medicine visits over 8 weeks, during the 6-month post-surgical treatment period. An initial course of therapy would be supported for one-half the general course, or up to 8 visits. With documentation of functional improvement, a subsequent course of therapy shall be prescribed within the parameters of the general course of therapy applicable to the specific surgery. If it is determined that additional functional improvement can be accomplished after completion of the general course of therapy, physical medicine treatment may be continued up to the end of the postsurgical period. This injured worker is status post cervical foraminotomies at C5-C7. He was doing well and had been released to begin post-op physical therapy. This request for an initial 18 post-op visits was modified in utilization review on 7/6/15 to 16 visits which equates to the recommended general course of care. There is no compelling rationale to support the medical necessity of treatment beyond the recommended initial and general courses of post-op physical therapy. Therefore, this request is not medically necessary.