

<b>Case Number:</b>	CM15-0141268		
<b>Date Assigned:</b>	07/31/2015	<b>Date of Injury:</b>	07/29/2013
<b>Decision Date:</b>	09/02/2015	<b>UR Denial Date:</b>	07/01/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/21/2015

### 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: Texas, New York, 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 applicant is a represented 42-year-old who has filed a claim for chronic low back, ankle, and foot pain reportedly associated with an industrial injury of July 29, 2013. In a Utilization Review report dated July 1, 2015, the claims administrator failed to approve a request for aquatic therapy. The claims administrator referenced a June 24, 2015 progress note and an associated RFA form of the same date in its determination. The claims administrator did partially approve six of the eight aquatic therapy treatments at issue. The claims administrator did not clearly state how much prior aquatic therapy the claimant had or had not had, however. Multiple progress notes interspersed throughout 2015 were notable for commentary to the effect that the applicant would remain off of work, on total temporary disability. The applicant's attorney subsequently appealed. On July 17, 2015, the applicant was placed off-of work, on total temporary disability. Ongoing complaints of ankle and foot pain were reported. The applicant reported issues with depression, fatigue, and poor energy level. The applicant exhibited a visibly antalgic gait requiring usage of a brace of some kind. The claimant was on Benadryl, Norco, Keppra, Ativan, and Naprosyn, it was reported. The claimant had primary pain generators of low back and ankle pain, it was reported. Cognitive behavioral therapy was endorsed while the claimant was kept off of work. The attending provider stated that the claimant did not "want regular physical therapy," and was only interested in pursuing aquatic therapy. On June 11, 2015, the claimant again reported multifocal complaints of low back, foot, ankle pain, depression, fatigue, poor energy levels, and loss of concentration. The claimant was on Norco, Keppra, Ativan, and Naprosyn, it was reported. The claimant exhibited an antalgic gait which was not fully characterized. It was

stated that the claimant was using a brace of some kind. The claimant was placed off of work, on total temporary disability. The claimant was asked to pursue aquatic therapy. The attending provider stated that the claimant had been approved for physical therapy in the past but had not received aquatic therapy. The attending provider stated that the claimant's last set of land-based physical therapy had provoked a seizure. Aquatic therapy was therefore endorsed. On February 10, 2015, it was acknowledged that the applicant had had earlier foot surgery, physical therapy, and 12 sessions of aquatic therapy. 7/10 pain complaints were noted. The claimant was placed off-of work, on total temporary disability, while Norco was renewed.

### **IMR ISSUES, DECISIONS AND RATIONALES**

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

**Aquatic therapy, quantity: 8 sessions:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG); Work Loss Data Institute, LLC; Corpus Christi, TX; [www.odg-twc.com](http://www.odg-twc.com); Section: Pain (Chronic) (updated 4/30/2015).

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Aquatic therapy; Functional Restoration Approach to Chronic Pain Management Page(s): 22; 8.

**Decision rationale:** No, the request for eight sessions of aquatic therapy was not medically necessary, medically appropriate, or indicated here. The request in question did represent a renewal or extension request for aquatic therapy as a historical progress note of February 10, 2015 stated that the applicant had had 12 sessions of aquatic therapy through that point in time. While page 22 of the MTUS Chronic Pain Medical Treatment Guidelines does acknowledge that aquatic therapy is recommended as an optional form of exercise therapy in applicants in whom reduced weight-bearing is desirable, this recommendation is, however, qualified by commentary made on page 8 of the MTUS Chronic Pain Medical Treatment Guidelines to the effect that demonstration of functional improvement is necessary at various milestones in the treatment program in order to justify continued treatment. Here, however, the previously performed eight sessions of aquatic therapy did not appear to have been particularly beneficial. The claimant was still described as exhibiting an antalgic gait on June 11, 2015. The claimant remained dependent on opioid agents such as Norco, it was reported on that date. The claimant remained off-of work, on total temporary disability, it was noted on June 11, 2015 and on multiple progress notes of early to mid 2015. All of the foregoing, taken together, suggested a lack of functional improvement as defined in MTUS 9792.20e, despite receipt of at least 12 prior sessions of aquatic therapy over the course of the claim. Therefore, the request for an additional eight sessions of aquatic therapy was not medically necessary.