

Case Number:	CM15-0188598		
Date Assigned:	09/30/2015	Date of Injury:	07/05/2014
Decision Date:	11/13/2015	UR Denial Date:	08/31/2015
Priority:	Standard	Application Received:	09/24/2015

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 68-year-old who has filed a claim for chronic knee pain reportedly associated with an industrial injury of July 5, 2014. In a Utilization Review report dated August 31, 2015, the claims administrator failed to approve a request for physical therapy for the knee. The claims administrator referenced an RFA form received on August 25, 2015 in its determination. An August 11, 2015 office visit was also cited in the determination. The applicant's attorney subsequently appealed. On a handwritten note dated July 21, 2015, the applicant reported ongoing complaints of knee pain. Physical therapy, a topical compounded cream, and Motrin were endorsed while the applicant was placed off of work, on total temporary disability. Overall commentary was sparse. On July 7, 2015, a pain management consultation and 12 sessions of physical therapy were sought. The note comprised, in a large part, of preprinted checkboxes, with little supporting rationale or commentary. On an RFA form dated July 22, 2015, multiple topical compounds were endorsed. On a handwritten note dated August 7, 2015, difficult to follow, not entirely legible, the applicant was placed off of work for six weeks. Ongoing complaints of knee pain were noted. The applicant was asked to pursue additional physical therapy for the same.

IMR ISSUES, DECISIONS AND RATIONALES

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

Physical therapy for the right knee, 12 visits: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Introduction, Physical Medicine.

Decision rationale: No, the request for 12 sessions of physical therapy for the knee was not medically necessary, medically appropriate, or indicated here. The 12-session course of treatment at issue, in and of itself, represented treatment in excess of the 9- to 10-session course suggested on page 99 of the MTUS Chronic Pain Medical Treatment Guidelines for myalgias and myositis of various body parts, i.e., the diagnosis reportedly present here. Page 8 of the MTUS Chronic Pain Medical Treatment Guidelines further stipulates that there must be demonstration of functional improvement at various milestones in the treatment program in order to justify continued treatment. Here, however, the applicant was off of work, on total temporary disability, as of the date of the request. The applicant remained dependent on multiple topical compounded agents, it was acknowledged on multiple office visits interspersed throughout July 2015. All of the foregoing, taken together, suggested a lack of functional improvement as defined in MTUS 9792.20e, despite receipt of unspecified amounts of physical therapy over the course of the claim. Therefore, the request was not medically necessary.