

Case Number:	CM15-0189303		
Date Assigned:	10/01/2015	Date of Injury:	09/14/2009
Decision Date:	11/09/2015	UR Denial Date:	08/25/2015
Priority:	Standard	Application Received:	09/25/2015

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: Massachusetts

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Pain Management

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 48 year old male with an industrial injury date of 09-14-2009. Review of medical records indicates he is being treated for status post right knee patellofemoral arthroplasty and removal of loose bodies (6 months prior). Subjective complaints (08-18-2015) included right knee locking, catching, swelling, weakness and tightness. The injured worker reported taking Diclofenac and Norco as needed with "mild relief. Work status (08-18-2015) is documented as "unable to work." In the 07-07-2015 treatment note the treating physician documented the injured worker had been attending physical therapy with "mild improvement but reports that his symptoms have remained about the same since his last visit 6 weeks ago." His medications included Advil, Diclofenac, Norco, Voltaren gel and Xarelto. Prior treatment included at least 27 visits of physical therapy (knee), surgery home exercise program and medications. Physical exam (08-18-2015) revealed right knee incision clean, dry and intact. Quad strength was documented as 4 plus out of 5 "limited exam." The treating physician documented: "Due to the patient's persistent pain, swelling, and quadriceps atrophy, he was advised to initiate a formal physical therapy program." On 08-25-2015, the request for additional physical therapy 2 times 6 to right knee was denied by utilization review.

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 6 to right knee: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Postsurgical Treatment 2009, Section(s): Knee.

Decision rationale: The claimant sustained a work injury in September 2009 and underwent right knee patellofemoral arthroplasty and removal of loose bodies on 02/15/15. He had post-operative physical therapy, completed 28 sessions, and was discharged with a home exercise program on 07/08/15. When seen, he was performing a home exercise program and aquatic therapy without relief. He was having pain with locking, catching, swelling, weakness, and tightness. There was a limited examination with decreased quadriceps strength. Additional physical therapy is being requested. After the surgery performed, guidelines recommend up to 12 visits over 12 weeks with a physical medicine treatment period of 4 months. In this case, the claimant has already had post-operative physical therapy including instruction in a home exercise program and appears to have derived maximal benefits from these treatments. The number of additional visits requested is in excess of that recommended or what might be needed to revise the claimant's home exercise program. The request is not medically necessary.