

Case Number:	CM15-0196857		
Date Assigned:	10/12/2015	Date of Injury:	02/20/2001
Decision Date:	11/25/2015	UR Denial Date:	09/28/2015
Priority:	Standard	Application Received:	10/06/2015

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 63-year-old who has filed a claim for chronic wrist pain reportedly associated with an industrial injury of February 20, 2001. On September 28, 2015, the attending provider partially approved request for 8 sessions of hand therapy as 3 sessions of the same. The claims administrator referenced a September 8, 2015 office visit in its determination. The claims administrator contended that the applicant had had 6 weeks in treatments. On a handwritten note dated September 8, 2015, the applicant reported ongoing complaints of wrist pain status post earlier carpal tunnel release surgery at an unspecified point in time. The applicant had completed 6 weeks in physical therapy treatment, the treating provider reported. Eight additional treatments were sought. The applicant's work status was not explicitly detailed, although it did not appear that the applicant was working as of this point. In the Work Status section of the note, the treating provider wrote "FM (future medical)-based on stip," suggesting that the applicant was not, in fact, working.

IMR ISSUES, DECISIONS AND RATIONALES

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

Hand Therapy 8 sessions 2x4: Upheld

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

MAXIMUS guideline: Decision based on MTUS General Approaches 2004, Section(s): Initial Approaches to Treatment, and Chronic Pain Medical Treatment 2009, Section(s): Introduction, Physical Medicine.

Decision rationale: No, the request for 8 sessions of hand therapy was not medically necessary, medically appropriate, or indicated here. While page 99 of the MTUS Chronic Pain Medical Treatment Guidelines does support an 8- to 10-session course of treatment for applicants with neuralgias and neuritis at various body parts, as was seemingly present here, 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 and by commentary made in the MTUS Guideline in ACOEM Chapter 3, page 48 to the effect that the value of physical therapy increases with a prescription which "clearly states treatment goals." Here, the September 8, 2015 office visit at issue was thinly and sparsely developed, handwritten, difficult to follow, not entirely legible, and did not clearly outline the applicant's response to earlier therapy. The applicant's work and functional status were not clearly articulated, although it did not appear that the applicant was working as of that point in time. Clear treatment goals were neither stated nor formulated on said handwritten September 8, 2015 office visit. Therefore, the request was not medically necessary.