

Case Number:	CM15-0199630		
Date Assigned:	10/14/2015	Date of Injury:	05/23/2014
Decision Date:	12/01/2015	UR Denial Date:	09/17/2015
Priority:	Standard	Application Received:	10/12/2015

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 knee and low back pain reportedly associated with an industrial injury of May 23, 2014. In a Utilization Review report dated September 17, 2015, the claims administrator failed to approve a request for a follow-up visit with the applicant's primary treating provider (PTP). A September 10, 2015 RFA form and an associated July 6, 2015 office visit were referenced in the determination. The claims administrator also failed to approve a request for a knee brace, it was further noted. The applicant's attorney subsequently appealed. On August 31, 2015, the attending provider reiterated his request for a knee brace. A follow-up appointment was likewise sought. The applicant reported ongoing complaints of neck, knee, and back pain. Well-preserved knee range of motion to 120 degrees was noted. The applicant's was not clearly described or characterized. The applicant was placed off of work, on total temporary disability.

IMR ISSUES, DECISIONS AND RATIONALES

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

PTP follow-up evaluation: Overturned

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

MAXIMUS guideline: Decision based on MTUS General Approaches 2004, Section(s): Cornerstones of Disability Prevention and Management.

Decision rationale: The request for a PTP (primary treating provider) follow-up evaluation/ follow-up visit was medically necessary, medically appropriate, or indicated here. As noted in the MTUS Guideline in ACOEM Chapter 5, page 79, frequent follow-up visits are "often warranted" in order to provide structure and reassurance even in those applicants whose conditions are not expected to change appreciably from week to week or visit to visit. Here, the applicant was off of work, on total temporary disability, it was reported on August 31, 2015. Multiple pain complaints were reported. A follow-up visit was, thus, indicated on several levels, including at a minimum, to help monitor the applicant's work status. Therefore, the request was medically necessary.

Left knee brace: Upheld

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

MAXIMUS guideline: Decision based on MTUS Knee Complaints 2004, Section(s): Activity Alteration.

Decision rationale: Conversely, the request for a left knee brace was not medically necessary, medically appropriate, or indicated here. As noted in the MTUS Guideline in ACOEM Chapter 13, page 340, for the average applicant, a knee brace is "usually unnecessary." Rather, the MTUS Guideline in ACOEM Chapter 13, page 340 notes that knee braces are typically necessary only if an applicant is going to be stressing the knee under load, such as by climbing ladders or carrying boxes. Here, however, the applicant was placed off of work, on total temporary disability, as of the date of the request, August 31, 2015. It did not appear likely that the applicant would be stressing the knee under load, climbing ladders, and/or carrying boxes, given the applicant's seeming failure to return to workplace as of the date of the request. Therefore, the request was not medically necessary.