

Case Number:	CM15-0201282		
Date Assigned:	10/16/2015	Date of Injury:	04/29/2015
Decision Date:	12/07/2015	UR Denial Date:	09/15/2015
Priority:	Standard	Application Received:	10/14/2015

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: California

Certification(s)/Specialty: Orthopedic Surgery, Hand Surgery, Sports 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 injured worker is a 29 year old female, who sustained an industrial injury on 4-29-15. The injured worker is being treated for laceration of right thumb, laceration of tendon of right thumb and laceration of digital nerve in right finger. On 8-5-15 and 9-14-15, the injured worker complains of difficulty bending her thumb, soreness and burning sensation of scar, sensitivity and it hurts while doing scar massage. She also notes numbness and tingling are improving. Work status is unclear. Physical exam performed on 8-5-15 and 9-14-15 revealed well-healed surgical scar of right thumb with restricted range of motion and normal range of motion of right index finger with mild tenderness of A-1 pulley. Slight decrease of sensation of right ulnar and radial nerve distribution is noted.(MRI) magnetic resonance imaging of right hand performed on 8-23-15 revealed mass like scarring of soft tissues adjacent to A1 pulley and first metacarpal phalangeal joint, flexor pollicis longus tendon is intact without recurrent rupture and early arthrosis of first metacarpal phalangeal joint is noted. Treatment to date has included repair of laceration of right thumb tendon, repair of laceration of digital nerve in right finger; physical therapy (unclear how many sessions completed or functional improvement from previous sessions), home exercise program and activity modifications. Request for authorization was submitted on 9-8-15 for 12 occupational therapy sessions. On 9-15-15 request for 12 occupational therapy sessions was modified to 6 sessions.

IMR ISSUES, DECISIONS AND RATIONALES

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

Occupational therapy for the right hand, quantity: 12 sessions: Upheld

Claims Administrator guideline: Decision based on MTUS Postsurgical Treatment 2009, Section(s): Forearm, Wrist, & Hand.

MAXIMUS guideline: Decision based on MTUS Postsurgical Treatment 2009, Section(s): Forearm, Wrist, & Hand.

Decision rationale: This is a request for 12 additional therapy sessions. Records reviewed indicate the injured worker cut a flexor tendon and nerve in the region of the flexor tendon sheath of her thumb on April 29, 2015 and underwent surgical repair on July 1, 2015. The utilization review report notes that 20 sessions of therapy have been performed. The California MTUS guidelines would support up to a maximum 30 therapy sessions following zone 2 flexor tendon repair or tenolysis; only 8 sessions are supported after digital nerve repair. With 20 sessions having been performed, the request for an additional 12 sessions exceeds guidelines and is not medically necessary.