

Case Number:	CM15-0058667		
Date Assigned:	04/03/2015	Date of Injury:	04/17/1996
Decision Date:	05/18/2015	UR Denial Date:	03/09/2015
Priority:	Standard	Application Received:	03/27/2015

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: Ohio, North Carolina, Virginia
Certification(s)/Specialty: Family Practice

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 63 year old female, who sustained an industrial injury on 04/17/1996. According to a progress report dated 02/24/2015, the injured worker was seen for neck pain and low back pain. She reported numbness and tingling to the upper and lower extremities that was intermittent. Diagnoses included history of anterior cervical fusion to C4 to C7 radiographically stable and intact, adjacent segment pathology C3-C4 facet arthropathy potentially also at the C7-T1 level with ongoing mechanical and radicular symptoms upper extremities worsening pain in nature, history of low back pain, fusion L5-S1 with anterior approach with retained interbody cages, adjacent segment pathology at the L4-L5 with mechanical pain as well as radicular pain of her right lower extremity greater than left and right knee meniscal pathology continuing to be symptomatic and followed by an orthopedic surgeon independently. Treatment to date has included medications and electrodiagnostic studies. Recommendations included Baclofen, Voltaren, Duexis, electrodiagnostic testing of the lower extremities and physical therapy.

IMR ISSUES, DECISIONS AND RATIONALES

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

Physical therapy 3 times a week for 6 weeks, cervical and lumbar spine: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines physical medicine Page(s): 98-99. Decision based on Non-MTUS Citation Official Disability

Guidelines-Treatment in Workers' Compensation (ODG-TWC) Neck & Upper Back Procedure Summary Online Version last updated 11/18/2014, ODG Low Back Procedure Summary Online Version last updated 01/30/2015.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines. Neck and upper back and low back chapters. Physical therapy sections.

Decision rationale: The request is for 18 sessions of physical therapy for the cervical and lumbar spines. Per the Official Disability Guidelines: Degeneration of cervical intervertebral disc (ICD9 722.4): 10-12 visits over 8 weeks. See 722.0 for post-surgical visits. Brachial neuritis or radiculitis NOS (ICD9 723. 4): Intervertebral disc disorders without myelopathy (Lumbar) (ICD9 722.1; 722.2; 722.5; 722.6; 722.8): Medical treatment: 10 visits over 8 weeks. The injured worker in this case has had cervical and lumbar fusions years ago and presumably had post-operative physical therapy. She has ongoing neck and back pain with radicular symptoms. The cited guidelines allow for up to 12 physical therapy visits over 10 weeks for this clinical picture. Therefore, physical therapy 3 times a week for 6 weeks, cervical and lumbar spine is not medically necessary with reference to the cited guidelines. 12 visits over 10 weeks