

Case Number:	CM15-0083283		
Date Assigned:	05/05/2015	Date of Injury:	02/06/2009
Decision Date:	06/04/2015	UR Denial Date:	04/22/2015
Priority:	Standard	Application Received:	04/30/2015

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: Maryland

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Neuromuscular 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 60-year-old female, who sustained an industrial injury on 02/06/2009. According to a progress report dated 02/24/2015, the injured worker reported intermittent moderate pain in both hands with decreased strength and weakness of the hands. She was not taking any medications due to abdominal pain. A psychologist regarding her depression saw her. Diagnoses included status post right carpal tunnel release with residual, left carpal tunnel syndrome De Quervain's tenosynovitis, ganglion cyst, chronic left middle trigger finger, status post left carpal release on 08/24/2011 and status post right long finger trigger finger release. The injured worker had been authorized to undergo physical therapy to the left wrist twice a week for four weeks. According to a physical therapy progress report dated 03/24/2015, the injured worker had completed 8 prescribed sessions of physical therapy and had made moderately good improvement. Accomplishments made included a moderately improved grip and upper extremity strength, independence, and competence with a home exercise program. The provider noted that although there had not been significant improvement, she had been dealing with the injuries for over 6 years. Recommendations included additional physical therapy. Currently under review is the request for physical therapy 2 times per week for 4 weeks for the bilateral hands.

IMR ISSUES, DECISIONS AND RATIONALES

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

Physical therapy 2 times per week for 4 weeks for bilateral hands: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines, Postsurgical Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Physical Medicine Page(s): 98-99, Postsurgical Treatment Guidelines Page(s): 15-16 and 22.

Decision rationale: Physical therapy 2 times per week for 4 weeks for bilateral hands is not medically necessary per the MTUS Chronic Pain Medical Treatment Guidelines and the MTUS Post surgical guidelines. The MTUS recommends up to 8 visits for carpal tunnel release surgery whether endoscopic or open within the 3 month post operative time period. The MTUS recommends up to 9 visits within 4 months for trigger finger release. The documentation indicates that the patient had her carpal tunnel release in 2011. It is unclear when the trigger finger release was. She has completed at least 8 prior PT sessions. There are no extenuating circumstances documented that would require 8 more supervised therapy sessions. The MTUS recommends transition to an independent home exercise program. The documentation indicates that the patient is competent in a home exercise program. The request for 8 more therapy sessions is not medically necessary.