

<b>Case Number:</b>	CM14-0115347		
<b>Date Assigned:</b>	09/16/2014	<b>Date of Injury:</b>	10/12/2004
<b>Decision Date:</b>	10/17/2014	<b>UR Denial Date:</b>	07/09/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/22/2014

### 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. The expert reviewer is Board Certified in Occupational Medicine, and is licensed to practice in California. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

### CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

**CLINICAL SUMMARY:** The applicant is a represented [REDACTED] employee who has filed a claim for chronic low back pain reportedly associated with an industrial injury of October 12, 2004. Thus far, the applicant has been treated with the following: Analgesic medications; topical compounds; unspecified amounts of physical therapy over the course of the claim; unspecified amounts of acupuncture; opioid therapy; and inguinal herniorrhaphy surgery. In a Utilization Review Report dated July 9, 2014, the claims administrator partially certified a request for eight sessions of aquatic therapy at six sessions of the same and apparently approved a general surgery consultation. In a January 7, 2014 progress note, the applicant reported persistent complaints of low back pain. The applicant was reportedly walking one mile daily, despite ongoing issues of chronic low back pain and despite recent bereavement, including the death of two family members. The applicant was asked to start aquatic therapy. Norco, Lidoderm, Naprosyn, and Zofran were apparently prescribed, along with an eight-session course of aquatic therapy. Medial branch blocks were also sought. In a mental health progress note dated June 23, 2014, the applicant apparently presented with issues associated with anxiety and dysphoria. Xanax was apparently renewed. In a handwritten note dated June 30, 2014, an additional eight sessions of aquatic therapy were sought owing to persistent complaints of low back pain radiating into the left leg. The applicant's gait was not formally detailed. In a later note dated June 30, 2014, the applicant stated that he was seeking aquatic therapy for pain-relief purposes. The applicant was again described as walking one mile daily. The applicant exhibited a normal gait on inspection in the clinic setting, it was further noted.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Aquatic Therapy, Lumbar Spine 2 x per Week x 4 Weeks: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 10 Elbow Disorders (Revised 2007), Acupuncture Treatment Guidelines, Chronic Pain Treatment Guidelines, Postsurgical Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines: Physical Therapy Official Disability Guidelines: Work Loss Data

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Aquatic Therapy topic Page(s): 22.

**Decision rationale:** While page 22 of the MTUS Chronic Pain Medical Treatment Guidelines does acknowledge that aquatic therapy is recommended as an optional form of exercise therapy in applicants in whom reduced weight bearing is desirable, in this case, however, there is no evidence of reduced weight bearing being desirable here. The applicant is reportedly able to walk up to a mile a day; it was suggested in January 2014. It is not clear, thus, why aquatic therapy is being sought in favor of land-based therapy and/or land-based exercises. Therefore, the request is not medically necessary.