

<b>Case Number:</b>	CM14-0123802		
<b>Date Assigned:</b>	08/08/2014	<b>Date of Injury:</b>	02/29/2012
<b>Decision Date:</b>	10/23/2014	<b>UR Denial Date:</b>	08/01/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/05/2014

### 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:

The applicant is a represented [REDACTED] employee who has filed a claim for chronic neck and shoulder pain reportedly associated with an industrial injury of February 29, 2012. Thus far, the applicant has been treated with the following: Analgesic medications; unspecified amounts of physical therapy; unspecified amounts of acupuncture; and unspecified amounts of aquatic therapy. In a Utilization Review Report dated August 5, 2014, the claims administrator denied a request for six sessions of physical therapy. Non-MTUS ODG guidelines were apparently invoked to deny the same, despite the fact that the MTUS addressed the topic. The claims administrator did suggest that the applicant had had three sessions of physical therapy in June 2014. The claims administrator apparently based its denial on a request for authorization (RFA) form dated July 25, 2014. This form, however, was not incorporated into the Independent Medical Review packet. The applicant's attorney subsequently appealed. In a handwritten note dated May 30, 2014, it appeared that the applicant received a variety of passive modalities, including soft tissue, myofascial release, infra red therapy, and acupuncture. The applicant's work status was not attached.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**(6) Physical Therapy visits for the right shoulder:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 9 Shoulder Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines Physical Therapy Guidelines

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Physical Medicine Page(s): 99, 8.

**Decision rationale:** While page 99 of the MTUS Chronic Pain Medical Treatment Guidelines does support a general course of 9 to 10 sessions of treatment for myalgias and myositis of various body parts, the issue reportedly present here, this recommendation is qualified by commentary on page 8 of the MTUS Chronic Pain Medical Treatment Guidelines to the effect that there must be some demonstration of functional improvement at various milestones in the treatment program in order to justify continued treatment. In this case, however, the handwritten progress note provided contained no mention of program progression or functional improvement with earlier unspecified amounts of physical therapy over the course of the claim. The applicant's work status, functional status, and response to earlier treatment was not clearly established, although it is acknowledged that the claims administrator seemingly failed to incorporate the July 25, 2014 request for authorization (RFA) form and associated progress note into the Independent Medical Review packet. The information which is on file, however, fails to support the request. Therefore, the request is not medically necessary.