

Case Number:	CM14-0163653		
Date Assigned:	10/08/2014	Date of Injury:	03/19/2013
Decision Date:	11/13/2014	UR Denial Date:	09/24/2014
Priority:	Standard	Application Received:	10/06/2014

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 low back pain reportedly associated with an industrial injury of March 19, 2013. Thus far, the applicant has been treated with the following: Analgesic medications; transfer of care to and from various providers in various specialties; an earlier L4-L5 lumbar microdiscectomy decompression surgery of April 29, 2014. In a September 24, 2014 Utilization Review Report, the claims administrator denied a request for 12 sessions of physical therapy, invoking the MTUS Chronic Pain Medical Treatment Guidelines, despite the fact that the applicant was still within the six-month postsurgical physical medicine treatment period established in MTUS 9792.24.3 following earlier discectomy-laminectomy surgery of April 29, 2014. The applicant's attorney subsequently appealed. In an April 28, 2014 preoperative clearance, it was acknowledged that the applicant had a three-pack-year history of smoking and reportedly quit smoking "eight days" before the surgery. The applicant was described as status post six to seven epidural steroid injections. The applicant was a carpenter. The applicant underwent an L4-L5 microdecompression/microdiscectomy surgery on April 29, 2014. On June 27, 2014, the applicant was apparently kept off of work, on total temporary disability. Additional physical therapy was sought. The applicant did have persistent complaints of low back pain and left leg soreness. Norco was apparently renewed. The incision was reportedly healing well. It was not clearly stated how much postoperative physical therapy the applicant had had through this point in time.

IMR ISSUES, DECISIONS AND RATIONALES

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

Physical therapy (PT) times 12 lumbar: Overturned

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

MAXIMUS guideline: Decision based on MTUS Postsurgical Treatment Guidelines.

Decision rationale: While approval of the request may result in extension of an overall course of physical therapy slightly beyond the 16-session overall course recommended in MTUS 9792.24.3 following diskectomy/laminectomy surgery, as apparently transpired here, this recommendation, however, is qualified by commentary made on MTUS 9792.24.3.c.2 to the effect that the medical necessity for postsurgical physical medicine is contingent on applicant-specific factors, such as comorbidities and/or an applicant's essential work function. In this case, the applicant is a carpenter. The applicant's job duties, thus, are more arduous than is typical and/or encapsulated in the guideline. The applicant is a smoker, suggesting possible issues with delayed healing associated with smoking. Additional treatment beyond MTUS parameters is therefore indicated. Accordingly, the request is medically necessary.