

<b>Case Number:</b>	CM14-0146702		
<b>Date Assigned:</b>	09/18/2014	<b>Date of Injury:</b>	02/26/2013
<b>Decision Date:</b>	01/02/2015	<b>UR Denial Date:</b>	08/15/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/09/2014

### 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 knee pain reportedly associated with an industrial injury of February 26, 2013. Thus far, the applicant has been treated with the following: Analgesic medications; earlier knee ACL reconstruction surgery on July 26, 2013; and 12 sessions of postoperative physical therapy, per the claims administrator. In a Utilization Review Report dated August 15, 2014, the claims administrator failed to approve a request for 12 sessions of physical therapy with work conditioning for the knee. The claims administrator suggested that the applicant had limitations in place as of the date of the request in its UR report. The applicant's attorney subsequently appealed. In a July 30, 2014 progress note, the applicant reported ongoing complaints of knee and leg pain. The applicant's stability was much better. The applicant was status post ACL reconstruction surgery on July 26, 2013, it was stated. The attending provider stated that the applicant had recently been approved for another 12 session of physical therapy. The applicant exhibited full range of motion and strength about the injured knee. The applicant was formerly employed as a custody assistant at the [REDACTED], it was stated. The attending provider suggested that the applicant complete the 12 sessions of previously approved physical therapy and then pursue additional 12 sessions for work conditioning purposes. The attending provider then stated that he was going to keep the applicant on restricted duty work. It was suggested (but not clearly stated) that the applicant was working with said limitations in place.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Physical Therapy with work conditioning, Right knee 2 x 6.: Upheld**

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Work Conditioning, Work Hardening Page(s): 125.

**Decision rationale:** While page 125 of the MTUS Chronic Pain Medical Treatment Guidelines does acknowledge that 10 sessions of work conditioning are recommended over eight weeks in applicants who have work-related musculoskeletal deficits with functional limitations precluding the ability to safely achieve current job demands, page 125 of the MTUS Chronic Pain Medical Treatment Guidelines qualifies its position by noting that work conditioning and/or work hardening should be considered only if applicants have had treatment with an adequate trial of physical and/or occupational therapy who are not likely to benefit from continued physical or occupational therapy or general conditioning. Here, however, the applicant had 12 sessions of previously authorized physical therapy pending as of the date of the July 30, 2014 office visit on which 12 sessions of work conditioning at issue were sought. It was not clearly stated why the applicant could not complete the previously authorized treatment before or considering or contemplating work conditioning. The attending provider did not, Furth more, clearly outline what job demands and/or job duties the applicant was unable to perform safely and/or would require formal work conditioning to rehabilitate. Therefore, the request is not medically necessary.