

Notice of Independent Medical Review Determination

Dated: 12/5/2013

[REDACTED]

[REDACTED]

Employee:	[REDACTED]
Claim Number:	[REDACTED]
Date of UR Decision:	7/31/2013
Date of Injury:	3/1/2011
IMR Application Received:	8/14/2013
MAXIMUS Case Number:	CM13-0011080

- 1) MAXIMUS Federal Services, Inc. has determined the request for **post-operative physical therapy; two times per week for eight weeks is medically necessary and appropriate.**

INDEPENDENT MEDICAL REVIEW DECISION AND RATIONALE

An application for Independent Medical Review was filed on 8/14/2012 disputing the Utilization Review Denial dated 7/31/2013. A Notice of Assignment and Request for Information was provided to the above parties on 9/19/2013. A decision has been made for each of the treatment and/or services that were in dispute:

- 1) MAXIMUS Federal Services, Inc. has determined the request for **post-operative physical therapy; two times per week for eight weeks is medically necessary and appropriate.**

Medical Qualifications of the Expert Reviewer:

The independent Medical Doctor who made the decision has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Physical Medicine and Rehabilitation, has a subspecialty in Neuromuscular Medicine and is licensed to practice in Maryland. 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 treatments and/or services at issue.

Expert Reviewer Case Summary:

Patient had an Initial date of injury of 03/01/11. On 01/24/13 patient had surgery with left ankle lateral ligament reconstruction, peroneal exploration, and fibular ossicle removal. The issue at hand is whether PT is medically necessary 2 x per week for 8 weeks post operatively. As of 7/23/13 documents indicate the patient has completed 14 out of 16 post operative PT visits. CA MTUS supports 34 visits of postoperative PT after ankle ligament surgery with half of that amount recommended initially. On 8/6/13 therapy notes there is documentation of decreased pain, objective documentation of increased range of motion of the ankle (but not yet full range of motion) from initial PT evaluation but persistent weakness in ankle movements. The goals of PT are to continue to work on strengthening and range of motion which will continue to decrease pain and increase functional goals.

Documents Reviewed for Determination:

The following relevant documents received from the interested parties and the documents provided with the application were reviewed and considered. These documents included:

- Application of Independent Medical Review
- Utilization Review Determination
- Medical Records from Claims Administrator
- Medical Treatment Utilization Schedule (MTUS)

1) Regarding the request for post-operative physical therapy; two times per week for eight weeks:

The Medical Treatment Guidelines Relied Upon by the Expert Reviewer to Make His/Her Decision

The Claims Administrator based its decision on the CA MTUS, which is part of the MTUS.

The Expert Reviewer based his/her decision on the Postsurgical Treatment Guidelines, Ankle Section, pages 12-13, which is part of the MTUS.

Rationale for the Decision:

The requested treatment of post operative PT 2 x per week for 8 weeks is medically necessary as the employee continues to have some limitations in range of motion and strength in the ankle movements, and does show gradual improvement with these from the initial therapy visits. It is anticipated as the employee increases the strength and range of motion the function will increase. Additionally the MTUS Post Surgical Guidelines support 34 visits of postoperative PT after ankle ligament surgery with half of that amount recommended initially. It should be noted that the MTUS guidelines state "The medical necessity for postsurgical physical medicine treatment for any given patient is dependent on, but not limited to, such factors as the comorbid medical conditions; prior pathology and/or surgery involving same body part; nature, number and complexities of surgical procedure(s) undertaken; presence of surgical complications; and the patient's essential work functions".

It is evident from the employee's medical notes by the surgeon from Oct. 2012 that preoperatively the employee had not strengthened the ankle much. It is unclear from the notes how much, if any, pre-op PT sessions the employee had. Due to this fact the post-op therapy may need to go longer to increase the employee's strength and ultimately increase function. **The request for post-operative physical therapy; two times per week for eight weeks is medically necessary and appropriate.**

Effect of the Decision:

The determination of MAXIMUS Federal Services and its physician reviewer is deemed to be the final determination of the Administrative Director, Division of Workers' Compensation. With respect to the medical necessity of the treatment in dispute, this determination is binding on all parties.

In accordance with California Labor Code Section 4610.6(h), a determination of the administrative director may be reviewed only if a verified appeal is filed with the appeals board for hearing and served on all interested parties within 30 days of the date of mailing of the determination to the employee or the employer. The determination of the administrative director shall be presumed to be correct and shall be set aside only upon proof by clear and convincing evidence of one or more of the grounds for appeal listed in Labor Code Section 4610.6(h)(1) through (5).

Sincerely,

Paul Manchester, MD, MPH
Medical Director

cc: Department of Industrial Relations
Division of Workers' Compensation
1515 Clay Street, 18th Floor
Oakland, CA 94612

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Disclaimer: MAXIMUS is providing an independent review service under contract with the California Department of Industrial Relations. MAXIMUS is not engaged in the practice of law or medicine. Decisions about the use or nonuse of health care services and treatments are the sole responsibility of the patient and the patient's physician. MAXIMUS is not liable for any consequences arising from these decisions.