

Case Number:	CM14-0143541		
Date Assigned:	09/12/2014	Date of Injury:	12/29/2012
Decision Date:	10/07/2014	UR Denial Date:	08/20/2014
Priority:	Standard	Application Received:	09/04/2014

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 Physical Medicine and Rehabilitation and is licensed to practice in Louisiana. 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 patient is a 39 year old female who was injured on 12/09/2012. The mechanism of injury is unknown. Prior medication history included Zanaflex and Relafen. She has been conservatively treated with TENS, knee brace. A Progress report dated 06/11/2014 documented the patient presented for follow-up of her knee and back and was complaining of continued pain. She reported her knee brace was helping as well as pain medication and muscle relaxant. On exam, she has swelling and joint tenderness. The back revealed tenderness in the low back area and decreased range of motion secondary to pain. A progress report dated 07/23/2014 indicates the patient complained of knee and back complaints with radiation of pain down into her buttocks area. The patient reported she was using a TENS unit which had been very helpful for her back. Her exam was unchanged. She is diagnosed with left knee synovitis and low back pain. She has been recommended for aquatic therapy as she has had therapy in the past which was very helpful and MRI of the lumbar spine to investigate neurologic impingement. A Prior utilization review dated 08/20/2014 states the requests for Aquatic therapy, two times per week for six weeks (2x6) QTY: 12 and MRI of lumbar spine are not medically necessary.

IMR ISSUES, DECISIONS AND RATIONALES

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

Aquatic therapy, two times per week for six weeks (2x6) QTY: 12: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Aquatic therapy, Page(s): 22.

Decision rationale: The California MTUS guidelines support aquatic therapy for individuals who have medical issues that limit their ability to perform weight bearing exercise, for example extreme obesity. The supporting documentation provided does not indicate the need for reduced gravity environment for exercise or specific musculoskeletal impairments noted that would prevent performance for land-based therapy/exercise. The request for this treatment is not medically necessary.

MRI of lumbar spine: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints.

Decision rationale: The CA MTUS/ACOEM guidelines indicate that for patients with limitations of activity after four weeks and unexplained physical findings, such as effusions or localized pain, imaging may be indicated to clarify the diagnosis and assist reconditioning. There are no objective findings of neurological deficits that would justify the need for imaging studies. Based on the lack of documentation to support the guideline recommendation for a MRI, the request is not medically necessary at this time.