

<b>Case Number:</b>	CM13-0067626		
<b>Date Assigned:</b>	01/03/2014	<b>Date of Injury:</b>	08/22/2012
<b>Decision Date:</b>	05/21/2014	<b>UR Denial Date:</b>	12/13/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	12/18/2013

### 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 has a subspecialty in Pain Management 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:

This is a female patient with a date of injury of August 22, 2012. A utilization review determination dated December 13, 2013 recommends noncertification of Orthovisc injections right knee quantity 3. Noncertification is recommended due to lack of documentation indicating a failure of conservative treatment, and a lack of imaging studies identifying osteoarthritis of the knee. A progress report dated July 30, 2013 indicates that the patient continues to have right knee pain and has failed a 24 physical therapy sessions. The medication significantly improves the patient's pain and function. Physical examination identifies a positive McMurray's test, slightly antalgic gait, reduced range of motion, and the difficulty rising from a seated position. The diagnoses include rule out medial meniscus tear in the right knee. The treatment plan recommends continuing use of medication and request an MRI of the right knee. A report dated June 25, 2013 indicates that the patient is having severe right knee pain with swelling, catching, locking, and giving way. An arthrogram of the right knee dated December 5, 2012 identifies no meniscal tear evident, edema along the ACL, and mild lateral subluxation of the patella without cartilage abnormality. The report further states that there is no evidence of degeneration of the cartilage. A progress report dated November 19, 2013 indicates that the patient continues to have ongoing right knee pain. Physical examination findings identify patellofemoral compression pain and competence with slight lateralization. There is popping of the right patella throughout flexion and extension with a negative McMurray's test. Diagnoses include probable right knee chondromalacia patella. Treatment plan recommends the trial of Orthovisc injections.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**THREE ORTHOVISC INJECTIONS (RIGHT KNEE): Upheld**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), TWC, Knee and Leg Procedure Summary.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Page(s): 339.

**Decision rationale:** Regarding the request for Orthovisc, Occupational Medicine Practice Guidelines do not contain specific criteria regarding the use of hyaluronic acid injections. ODG states that hyaluronic acid injections are recommended as a possible option for severe osteoarthritis for patients who have not responded adequately to recommended conservative treatments. Within the documentation available for review, the requesting physician has now documented that the patient has failed conservative treatment including physical therapy and medication. However, there is no documentation of an x-ray identifying osteoarthritis in the right knee. Additionally, guidelines do not support the use of hyaluronic acid injections for chondromalacia patellae. As such, the currently requested Orthovisc injections X3 right knee is not medically necessary.