

Case Number:	CM14-0000586		
Date Assigned:	01/17/2014	Date of Injury:	08/16/2010
Decision Date:	05/12/2014	UR Denial Date:	12/10/2013
Priority:	Standard	Application Received:	01/02/2014

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a Physician Reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The Physician Reviewer is Board Certified in Orthopedic Surgery, 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 Physician 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 42-year-old male who sustained an injury to the left knee on August 16, 2010. The records provided for review documented that following a course of conservative care, the claimant underwent a left knee arthroscopy with meniscectomy on January 14, 2011. An October 18, 2013 progress report documented continued complaints of pain, noting that the claimant had viscosupplementation injections performed in January 2013 which had "worn off." The progress report documented that the claimant declined a corticosteroid injection on that date and wished a repeat series of viscosupplementation injections given his prior positive response. Physical examination demonstrated tenderness of the medial joint line. Diagnosis was left knee degenerative joint disease status post meniscectomy. Recommendation was made for anti-inflammatory agents and viscosupplementation injections. While formal imaging reports were not available for review the progress report documented that a previous MRI scan showed degenerative changes and that operative findings demonstrated chondral change to the medial compartment.

IMR ISSUES, DECISIONS AND RATIONALES

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

LEFT KNEE SYNVISIC INJECTION: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITY GUIDELINES (ODG).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITY GUIDELINES (ODG) - TREATMENT IN WORKERS COMP (TWC), 18TH EDITION, 2013 UPDATES: KNEE PROCEDURE: HYALURONIC ACID INJECTIONS.

Decision rationale: The California MTUS and ACOEM Guidelines do not address this topic. Based upon the Official Disability Guidelines, the request for viscosupplementation injections in this case would be supported. The medical records document that the employee has degenerative changes and responded well to viscosupplementation injections in the past. The records document that the employee received six months of relief since the time of previous injections. Therefore, the employee meets the Official Disability Guidelines for a left knee Synvisc injection.

RETROSPECTIVE REVIEW OF LEFT KNEE STEROID INJECTION FOR DATE OF SERVICE 10/18/13: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints.

Decision rationale: The California ACOEM Guidelines indicate that Corticosteroid Injections are optional for knee disorders. The records document in the October 18, 2013 progress report that the treating physician recommended a steroid injection but the employee declined the injection. Therefore, based upon the ACOEM Guidelines and the employee's declined injection, the retrospective review of the left knee steroid injection for date of service 10/18/13 would not be recommended as medically necessary.