

Case Number:	CM14-0018027		
Date Assigned:	04/16/2014	Date of Injury:	06/23/2011
Decision Date:	06/03/2014	UR Denial Date:	01/30/2014
Priority:	Standard	Application Received:	02/12/2014

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 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 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 41-year-old gentleman who was injured in a work related accident 06/23/11. Specific to the claimant's right knee, a 12/02/13 MRI report showed previous ACL reconstruction with graft intact, partial meniscectomy changes with residual lateral meniscal remnant and full thickness articular cartilage deficit to the weightbearing portion of the lateral tibial plateau stated to be a new finding since the time of previous MRI of March 2012. A 02/27/14 report with [REDACTED] indicated continued complaints of pain about the right knee with a current diagnosis of meniscal tear and chondromalacia. Objectively ligamentous examination was intact with 0 to 120 degrees range of motion and positive distraction testing. Given the claimant's MRI findings, a surgical arthroscopy with chondroplasty and meniscectomy was recommended.

IMR ISSUES, DECISIONS AND RATIONALES

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

RIGHT KNEE ARTHROSCOPY WITH CHONDROPLASTY AND MENISECTOMY:
Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Page(s): 343.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 344-345.

Decision rationale: California ACOEM Guidelines would not support the acute need of knee arthroscopy. This claimant's imaging findings demonstrate endstage degenerative change to the lateral compartment with Grade IV full thickness or articular cartilage loss. While the claimant is noted to be status post a prior lateral meniscectomy, the acute need of further surgical process in regards to the claimant's meniscus in the setting of endstage articular cartilage loss would not be supported. Guideline criteria indicate that arthroscopy and meniscal surgery are not equally beneficial for individuals demonstrating signs of degenerative change. Specific surgical requests would not be supported.