

Case Number:	CM14-0135396		
Date Assigned:	08/29/2014	Date of Injury:	08/24/2011
Decision Date:	09/29/2014	UR Denial Date:	07/22/2014
Priority:	Standard	Application Received:	08/22/2014

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 Anesthesiology, 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:

According to the records made available for review, this is a 53-year-old female with an 8/24/11 date of injury. At the time (7/2/14) of request for authorization for one (1) Right knee synvisc injection (48mg/6ml), there is documentation of subjective (excellent relief of symptoms with Synvisc injections) and objective (trace effusion and tenderness to medial and lateral compartment, positive patellofemoral grind, positive patellofemoral crepitation, pain with deep squat, range of motion 0 to 124 degrees, and strength 4/5 in flexion and extension) findings, imaging findings (reported right knee MRI (10/5/12) revealed osteoarthritis and multicompartmental chondromalacia), current diagnoses (industrial injury to right knee, right ankle, and lumbar spine on 8/24/11, MRI of right knee on 10/5/12 revealing osteoarthritis and multicompartmental chondromalacia, Synvisc viscosupplementation to the right knee in December 2012, July 2013, and April 2014 with excellent relief of symptoms greater than 6 months), and treatment to date (previous Synvisc injection with excellent relief of symptoms and home exercise program). Medical report indicates a plan to administer Synvisc injection in 12 weeks. There is no (clear) documentation of significant improvement in symptoms for 6 months or more and symptoms recur.

IMR ISSUES, DECISIONS AND RATIONALES

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

one (1) Right knee synvisc injection (48mg/6ml): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG (Official Disability Guidelines) Knee and Leg Chapter, Hyaluronic acid injections.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee, Hyaluronic acid injections.

Decision rationale: MTUS does not address this issue. ODG identifies documentation of significant improvement in symptoms for 6 months or more, and symptoms recur, as criteria necessary to support the medical necessity of repeat series of hyaluronic acid injections. Within the medical information available for review, there is documentation of industrial injury to right knee, right ankle, and lumbar spine on 8/24/11, MRI of right knee on 10/5/12 revealing osteoarthritis and multicompartamental chondromalacia, synvisc viscosupplementation to the right knee in December 2012, July 2013, and April 2014 with excellent relief of symptoms greater than 6 months. However, despite documentation of excellent relief of symptoms greater than 6 months with previous Synvisc injections and given documentation of previous synvisc injection on April 2014 and a plan for Synvisc injection in 12 weeks, there is no (clear) documentation of significant improvement in symptoms for 6 months or more and symptoms recur. Therefore, based on guidelines and a review of the evidence, the request for one (1) Right knee synvisc injection (48mg/6ml) is not medically necessary.