

Case Number:	CM14-0169064		
Date Assigned:	10/17/2014	Date of Injury:	05/19/2009
Decision Date:	11/19/2014	UR Denial Date:	09/24/2014
Priority:	Standard	Application Received:	10/14/2014

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 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 52-year-old male with a 5/19/09 date of injury. At the time (8/5/14) of request for authorization for Hyalgan injection x5 bilateral knees, there is documentation of subjective (moderate to severe bilateral knee pain with spasm, numbness, and tingling interfering with activities of daily living and difficulty sleeping due to pain) and objective (decreased bilateral knee range of motion) findings. Imaging findings reported MRI of the knees (undated), revealed severe arthritis along the medial joint line on the right and tri-compartmental arthritis on the left; report not available for review. The current diagnoses include bilateral knee internal derangement. The treatment to date includes Hyalgan injection to the knees, cortisone injection to the knees, physical therapy, and medication. There is no documentation significant improvement in symptoms for 6 months or more with previous Hyaluronic acid injection and recurrence of symptoms; and functional benefit or improvement as a reduction in work restrictions; an increase in activity tolerance; and/or a reduction in the use of medications or medical services as a result of Hyalgan injection(s) provided to date.

IMR ISSUES, DECISIONS AND RATIONALES

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

Hyalgan Injection x5 Bilateral Knees: 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), Knee & 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 Other Medical Treatment Guideline or Medical Evidence: Title 8, California Code of Regulations, section 9792.20

Decision rationale: The MTUS does not address this issue. MTUS-Definitions identifies that any treatment intervention should not be continued in the absence of functional benefit or improvement as a reduction in work restrictions; an increase in activity tolerance; and/or a reduction in the use of medications or medical services. The ODG identifies documentation of significant improvement in symptoms for 6 months or more with previous Hyaluronic acid injection and recurrence of symptoms, as criteria necessary to support the medical necessity of repeat Hyaluronic acid injection. Within the medical information available for review, there is documentation of diagnoses of bilateral knee internal derangement. In addition, there is documentation of status post Hylagan injection to the knees. However, there is no documentation of significant improvement in symptoms for 6 months or more with previous Hyaluronic acid injection and recurrence of symptoms; and functional benefit or improvement as a reduction in work restrictions; an increase in activity tolerance; and/or a reduction in the use of medications or medical services as a result of Hyalgan injection(s) provided to date. Therefore, based on guidelines and a review of the evidence, the request for Hyalgan injection x5 bilateral knees is not medically necessary.