

Case Number:	CM14-0185390		
Date Assigned:	11/13/2014	Date of Injury:	09/21/2013
Decision Date:	12/15/2014	UR Denial Date:	10/17/2014
Priority:	Standard	Application Received:	11/06/2014

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 Occupational Medicine 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 patient is a 64 y/o male who developed left knee problems subsequent to an injury dated 9/21/13. He has been diagnosed with a stress fracture of the tibial plateau with an associated subchondral defect. He also has a questionable meniscal tear plus a degenerated ACL ligament. Minimal osteoarthritic changes were noted on MRI scanning. He is improving with time and physical therapy and has regained full ROM.

IMR ISSUES, DECISIONS AND RATIONALES

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

Synvisc One injection left 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), Knee & Leg (Acute & Chronic)

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 Guidelines do not address this issue. ODG Guidelines directly address this and Hyaluronic injections (Synvisc) are not recommended unless there is severe or advanced osteoarthritis, which this patient does not have. These injections are not preventative

and are not recommended for other knee conditions. The request is not supported by Guidelines and there are no unusual circumstances to justify an exception. The Synvisc injection is not medically necessary.