

Case Number:	CM14-0028718		
Date Assigned:	06/16/2014	Date of Injury:	01/17/2013
Decision Date:	07/29/2014	UR Denial Date:	02/07/2014
Priority:	Standard	Application Received:	03/06/2014

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 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:

The injured worker is a 47-year-old male who reported an injury on 01/17/2013. On 09/04/2013, the injured worker had attended physical therapy sessions noting good progress overall however, he still presents with insufficient knee extension, range of motion limited and increased strength. It was noted the injured worker had improvement on his ability to walk, squat and negotiate stairs with less pain. It was noted the injured worker had 2 arthroscopic surgeries with meniscetomies, micro fracture and other procedure focally to the medial side of the right knee back in April 2013. On 01/23/2014 the injured worker complained of right knee pain. The physical examination revealed the knee was quiet without effusion but had medial joint and crepitus joint line tenderness. It was noted the range of motion of the right knee had 5 to 8 degrees of flexion contracture and further flexion had 130 degrees. It was noted the injured worker had medial compartment arthritis. It was noted the injured worker had no other options for a cartilage procedure and the only option for the injured worker was to have a total knee replacement. It was noted the injured worker would like to avoid surgery and return to work. It was noted the injured worker had received and 2 injections but there was no documented evidence provided on the efficacy of the injection for the injured worker. The diagnoses included status post right knee scope and osteoarthritis of the right knee. The treatment plan included for decision on Synvisc 1 injection into the right knee and for physical therapy for the right knee 2 times a week for 6 weeks (12 visits). The authorization for request was not for this review.

IMR ISSUES, DECISIONS AND RATIONALES

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

SYNVISC ONE INJECTION INTO THE RIGHT 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).

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: The request for Synvisc 1 injection into the right knee is not medically necessary. The ODG recommend Synvisc as a possible option for severe osteoarthritis for injured workers who have not responded adequately to recommended conservative treatments (exercise, nonsteroidal anti-inflammatory drugs, or acetaminophen) to potentially delay total knee replacement, but in recent quality studies the magnitude of improvement appears modest at best. While osteoarthritis of the knee is a recommended indication, there is insufficient evidence for other conditions, including patellofemoral arthritis, chondromalacia patellae, osteochondritis dissecans, or patellofemoral syndrome (patellar knee pain). Hyaluronic acids are naturally occurring substances in the body's connective tissues that cushion and lubricate the joints. Intra-articular injection of hyaluronic acid can decrease symptoms of osteoarthritis of the knee; there are significant improvements in pain and functional outcomes with few adverse events. Hyaluronic acids are naturally occurring substances in the body's connective tissues that cushion and lubricate the joints. Intra-articular injection of the hyaluronic acid can decrease symptoms of osteoarthritis of the knee; there are significant improvements in pain and functional outcomes with few adverse events. The diagnoses of the injured worker included osteoarthritis and arthroscopy of the right knee. There was lack of evidence of pain medication management and home exercise regimen. It was noted that the injured worker had good improvement overall with PT. In addition, that injured worker had received 2 injections but there was no documented evidence provided on the efficacy of the injection or functional improvement for the injured worker. Given the above, the request for Synvisc 1 injection into the right knee is not medically necessary.

PHYSICAL THERAPY FOR THE RIGHT KNEE, 2 TIMES A WEEK FOR 6 WEEKS (12 VISITS): Upheld

Claims Administrator guideline: Decision based on MTUS Postsurgical Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Postsurgical Treatment Guidelines Page(s): 24.

Decision rationale: The request for PT for the right knee, 2 times a week for 6 weeks (12 visits) is not medically necessary. The Post-Surgical Treatment Guidelines recommends that post-surgical treatment PT on the right knee is 12 visits over 12 weeks. It was noted that the injured worker has already had postop surgical treatment PT for the right knee. It was also noted on 09/04/2013 the injured worker had completed PT on the right knee for conservative care with good overall improvement with PT on the right knee. Given the above, the request PT for the right knee, 2 times a week for 6 weeks (12 visits) is not medically necessary.

