

Case Number:	CM14-0035844		
Date Assigned:	06/23/2014	Date of Injury:	07/10/2012
Decision Date:	10/01/2014	UR Denial Date:	03/04/2014
Priority:	Standard	Application Received:	03/24/2014

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 Texas. 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:

Medical records reflect the claimant is 53 male who sustained a work injury to the left knee on 7-10-12. On 12-11-13, the claimant underwent arthroscopy, partial medial and lateral meniscectomy, chondroplasty patella, medial femoral condyle, lateral tibial plateau and tricompartmental synovectomy joint debridement to the left knee. Documentation reflects that the claimant completed a course of physical therapy. On 2-24-14, he was provided with a steroid injection and recommendation was made for a Synvisc injection on this date.

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 left knee: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

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

Decision rationale: Chronic Pain Medical Treatment Guidelines and ACOEM are silent regarding this request. ODG reflects that hyaluronic acid injections are recommended as a possible option for severe osteoarthritis for patients who have not responded adequately to

recommended conservative treatments (exercise, NSAIDs or acetaminophen), to potentially delay total knee replacement, but in recent quality studies the magnitude of improvement appears modest at best. There is an absence in documentation noting this claimant's response to conservative treatment particularly the cortisone injection given on 2/24/14. Therefore, the medical necessity for a Synvisc injection is not established as medically indicated.