

Case Number:	CM14-0039607		
Date Assigned:	06/27/2014	Date of Injury:	12/20/2002
Decision Date:	07/28/2014	UR Denial Date:	03/25/2014
Priority:	Standard	Application Received:	04/03/2014

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:

Injured worker is a male with date of injury December 20, 2002. Per utilization review treatment appeal dated April 9, 2014, the injured worker continues to have bilateral knee pain despite conservative treatment followed by arthroscopic surgery and post-surgical physical therapy. He wears a knee brace on the right side. He wants to avoid surgery and is not interested in interventional injections. He is a candidate for knee surgery, however, he is afraid of surgery. He had a bicycle versus [REDACTED] truck accident on January of 2014 and experienced increased pain. He was given a knee brace and ibuprofen, and his pain returned to baseline after a few days. He notes a needle-like pain in his right knee and soreness. He states the knee will hurt when he stands for a prolonged period of time. The pain is along the lateral side of his right knee. On exam he ambulates from the examination room without assistance. The bilateral knees are positive for effusion, apprehension sign and joint line tenderness but not erythema and abrasion. Diagnoses include 1) bilateral ACL tears 2) degenerative joint disease 3) patellar chondromalacia 4) status post arthroscopic surgery on the right knee.

IMR ISSUES, DECISIONS AND RATIONALES

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

RT KNEE BRACE, BAUERFEIND BRAND: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 340.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints
Page(s): 340.

Decision rationale: The requesting physician clarifies that the injured worker's existing right knee brace is worn out and no longer beneficial, so a replacement brace is requested. The requesting physician also clarifies that the inability to stand for prolonged period, presence of effusion and positive apprehension sign in the right knee on examination indicates instability of the right knee. Given the chronicity of the injured worker's various right knee pathologies which reportedly warrant the use of knee brace and the persistent pain, a right knee brace is being requested to prevent worsening of his condition since the old knee brace is worn out. The requesting physician expect the brace would help to off-load his right knee and improve his functions by increasing his tolerances to standing and walking. According to the Knee Complaints Chapter of the ACOEM Practice Guidelines, the use of a knee brace is recommended for patellar instability, anterior cruciate ligament tear, or medial collateral ligament instability, although its benefits may be more emotional than medical. Usually a brace is necessary only in the patient is going to be stressing the knee under load, such as climbing ladders or carrying boxes. For the average patient, using a brace is usually unnecessary. This injured worker had positive results with the use of a knee brace, to the point that he wore the brace out. He is also motivated to avoid surgery and the brace appears to increase his confidence, otherwise it is not likely that he would be interested in having another brace. Medical necessity has been established, and it is reasonable to provide a replacement brace after one has been used to its life expectancy. The request for a right knee brace, Bauerfeind brand, is medically necessary and appropriate.