

<b>Case Number:</b>	CM14-0061907		
<b>Date Assigned:</b>	07/09/2014	<b>Date of Injury:</b>	05/29/2012
<b>Decision Date:</b>	08/22/2014	<b>UR Denial Date:</b>	04/22/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	05/02/2014

### 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:

The applicant is a represented [REDACTED] employee who has filed a claim for chronic low back and knee pain reportedly associated with an industrial injury of May 29, 2012. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representation; transfer of care to and from various providers in various specialties; earlier partial knee meniscectomy and chondroplasty surgery on October 21, 2013; unspecified amounts of physical therapy; and unspecified amounts of chiropractic manipulative therapy. In a Utilization Review Report dated April 22, 2014, the claims administrator apparently denied a request for viscosupplementation injection. No rationale for the same was proffered by the attending provider. The claims administrator stated that the attending provider did not document a complete physical exam. The claims administrator did not state which guidelines they were citing and did not incorporate any guidelines into its rationale. A May 12, 2014 medical-legal evaluation was notable for comments that the applicant presented with persistent complaints of low back pain, left knee pain, neck pain, and mid back pain. The applicant was described as off of work, on total temporary disability. The medical-legal evaluator did not appear to declare the applicant permanent and stationary. In a handwritten note of April 9, 2014, the applicant presented with persistent complaints of low back and left knee pain, 6-7/10. The applicant exhibited a slight limp and limited range of motion and limited knee flexion with joint line tenderness appreciated. A viscosupplementation injection and/or PRP injection to the knee were sought to alleviate the applicant's pain. The applicant was seemingly placed off of work. The note was extremely difficult to follow.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Viscosupplemental Inj Left Knee:** Overturned

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

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 13 Knee Complaints  
Page(s): Viscosupplementation Injections section.

**Decision rationale:** The MTUS does not address the topic of viscosupplementation injections. As noted in the Third Edition ACOEM Guidelines Knee Chapter viscosupplementation injection section, viscosupplementation injections are recommended in the treatment of moderate to-severe knee arthritis and/or knee pain status post earlier knee meniscectomy. In this case, the applicant appears to carry both diagnoses of knee pain status post knee meniscectomy and knee arthritis. The applicant is 52 years old, making it highly likely that the applicant in fact has knee arthritis, which has likely been accelerated as a result of the earlier knee meniscectomy surgery. The applicant has residual pain complaints following the failed meniscectomy surgery, it is further noted. Viscosupplementation injection, thus, is indicated, appropriate, and supported by ACOEM, given the failure of various operative and non-operative treatments. Accordingly, the request is medically necessary.