

<b>Case Number:</b>	CM14-0063889		
<b>Date Assigned:</b>	07/11/2014	<b>Date of Injury:</b>	08/20/2002
<b>Decision Date:</b>	08/18/2014	<b>UR Denial Date:</b>	05/01/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	05/06/2014

### 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:

According to the records made available for review, this is a 71-year-old female with an 8/20/02 date of injury. At the time (4/24/14) of the request for authorization for Vicodin 7.5mg #120 and Hyalgan injections to the left knee, there is documentation of subjective (pain that is moderate on an everyday basis) and objective (bilateral lower extremities extend to 180 degrees and flex to 90 degrees) findings, current diagnoses (internal derangement of the knees bilaterally status post joint replacement on the right and arthroscopy on the left, status post two series of Hyalgan point injection to the left knee), and treatment to date (Hyalgan injections and medication including ongoing use of Vicodin which is helpful and allows her to be functional and mobile). Regarding Vicodin 7.5mg #120, there is no documentation that the prescriptions are from a single practitioner and are taken as directed; the lowest possible dose is being prescribed; and there will be ongoing review and documentation of pain relief, functional status, appropriate medication use, and side effects. Regarding Hyalgan injections to the left knee, there is no documentation of significant improvement in symptoms for 6 months or more, and symptoms recur.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Vicodin 7.5mg #120:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids  
Page(s): 74-80.

**Decision rationale:** The MTUS Chronic Pain Medical Treatment Guidelines necessitate documentation that the prescriptions are from a single practitioner and are taken as directed; the lowest possible dose is being prescribed; and there will be ongoing review and documentation of pain relief, functional status, appropriate medication use, and side effects, as criteria necessary to support the medical necessity of opioids. The MTUS-Definitions identifies that any treatment intervention should not be continued in the absence of functional benefit or improvement as a reduction in work restrictions; an increase in activity tolerance; and/or a reduction in the use of medications or medical services. Within the medical information available for review, there is documentation of diagnoses of internal derangement of the knees bilaterally status post joint replacement on the right and arthroscopy on the left, status post two series of Hyalgan point injection to the left knee. In addition, there is documentation of ongoing use of Vicodin. Furthermore, given documentation that Vicodin is helpful and allows her to be functional and mobile, there is documentation of functional benefit with use of Vicodin. However, there is no documentation that the prescriptions are from a single practitioner and are taken as directed; the lowest possible dose is being prescribed; and there will be ongoing review and documentation of pain relief, functional status, appropriate medication use, and side effects. Therefore, based on guidelines and a review of the evidence, the request for Vicodin 7.5mg #120 is not medically necessary.

**Hyalgan injections to the Left Knee:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG, Knee and Leg Chapter, Hyaluronic acid injections.

**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 MTUS does not address this issue. The Official Disability Guidelines identifies documentation of significant improvement in symptoms for 6 months or more, and symptoms recur, as criteria necessary to support the medical necessity of repeat series of Hyaluronic acid injections. Within the medical information available for review, there is documentation of internal derangement of the knees bilaterally status post joint replacement on the right and arthroscopy on the left, status post two series of Hyalgan point injection to the left knee. However, there is no documentation of significant improvement in symptoms for 6 months or more, and symptoms recur. Therefore, based on guidelines and a review of the evidence, the request for Hyalgan injections to the left knee is not medically necessary.