

Case Number:	CM14-0082577		
Date Assigned:	07/21/2014	Date of Injury:	10/12/2011
Decision Date:	09/17/2014	UR Denial Date:	05/16/2014
Priority:	Standard	Application Received:	06/04/2014

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 Anesthesiology, has a subspecialty in Pain Management 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 42-year-old male with a 10/12/11 date of injury. At the time (5/1/14) of the request for authorization for three Euflexxa injections times two to bilateral knees, there is documentation of subjective complaint of bilateral knee pain with prolonged standing, walking, kneeling, or squatting. Objective findings of moderate tenderness, effusion 3+ bilaterally, atrophy bilaterally, strength is 4-/5 bilaterally, and decreased range of motion. Current diagnoses of primary LOC osteoarthritis lower leg and chondromalacia of patella. The treatment to date includes viscosupplemental injection therapy. There is no documentation of significant improvement in symptoms for 6 months or more.

IMR ISSUES, DECISIONS AND RATIONALES

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

3 Euflexxa injections times two to bilateral knees: 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), 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: MTUS does not address this issue. The Official Disability Guidelines (ODG) 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 diagnosis of primary LOC osteoarthritis lower leg and chondromalacia of patella. In addition, there is documentation of previous viscosupplemental injection therapy. However, there is no documentation of significant improvement in symptoms for 6 months or more. Therefore, based on guidelines and a review of the evidence, the request for 3 Euflexxa injections times 2 to bilateral knees is not medically necessary.