

Case Number:	CM14-0087301		
Date Assigned:	07/23/2014	Date of Injury:	06/04/2009
Decision Date:	10/14/2014	UR Denial Date:	05/21/2014
Priority:	Standard	Application Received:	06/10/2014

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 Illinois. 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 injured worker is a 58-year-old male mechanic who fell backwards at work on June 4, 2009. He complains of bilateral shoulder, left wrist, and bilateral knee pain. He states his knee pain is 9/10 and worsens when going up and down stairs, walking for prolonged periods of time, and rising from a seated position. His home exercise program consists of walking on a treadmill. His knee injections from 3 years ago did not help, acupuncture increased his pain, and physical therapy provided only minimal relief. Both knees had painful patellofemoral crepitus with movement, full range of motion, and his left knee had a positive McMurray's test. Magnetic resonance imaging of his right knee from Feb 16, 2011 showed a small amount of joint fluid and fibrotic stranding as well as a proximal lateral tibial osteochondroma.

IMR ISSUES, DECISIONS AND RATIONALES

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

Orthovisc Injection into right knee: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG), Knee, Hyaluronic Acid Injections

Decision rationale: Orthovisc is an injection that supplements knee fluid to help lubricate and cushion the joint, and can provide up to six months of osteoarthritis knee pain relief. Hyaluronan is a natural substance found in the body and is present in very high amounts in joints. The body's own hyaluronan acts like a lubricant and a shock absorber in the joint and is needed for the knee joint to work properly. Hyaluronic acid injections are not addressed in MTUS or ACOEM. Per ODG, they are recommended as a possible option for severe osteoarthritis for patients who have not responded adequately to recommended conservative treatments (exercise, non-steroidal anti-inflammatory drugs, or acetaminophen), to potentially delay total knee replacement, but in recent quality studies the magnitude of improvement appears modest at best. While osteoarthritis of the knee is a recommended indication, there is insufficient evidence for other conditions, including patellofemoral arthritis, chondromalacia patellae, osteochondritis dissecans, or patellofemoral syndrome (patellar knee pain). This injured worker has not been diagnosed with any of these conditions. Therefore, this request is not medically necessary.

Orthovisc Injection into left knee: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation (ODG), Knee, Hyaluronic Acid Injections

Decision rationale: Orthovisc is an injection that supplements knee fluid to help lubricate and cushion the joint, and can provide up to six months of osteoarthritis knee pain relief. Hyaluronan is a natural substance found in the body and is present in very high amounts in joints. The body's own hyaluronan acts like a lubricant and a shock absorber in the joint and is needed for the knee joint to work properly. Hyaluronic acid injections are not addressed in MTUS or ACOEM. Per ODG, they are recommended as a possible option for severe osteoarthritis for patients who have not responded adequately to recommended conservative treatments (exercise, non-steroidal anti-inflammatory drugs or acetaminophen), to potentially delay total knee replacement, but in recent quality studies the magnitude of improvement appears modest at best. While osteoarthritis of the knee is a recommended indication, there is insufficient evidence for other conditions, including patellofemoral arthritis, chondromalacia patellae, osteochondritis dissecans, or patellofemoral syndrome (patellar knee pain). This injured worker has not been diagnosed with any of these conditions. Therefore, this request is not medically necessary.