

Case Number:	CM14-0190312		
Date Assigned:	11/21/2014	Date of Injury:	05/29/2010
Decision Date:	02/03/2015	UR Denial Date:	10/15/2014
Priority:	Standard	Application Received:	11/14/2014

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 low back, knee, shoulder, neck, and wrist pain reportedly associated with an industrial injury of May 29, 2010. In a Utilization Review Report dated October 15, 2014, the claims administrator denied several MRI requests, including MRI imaging of the right shoulder, cervical spine, left knee, lumbar spine, and right knee. Non-MTUS Third Edition ACOEM Guidelines were cited at the bottom of the report, although none of the aforementioned guidelines were incorporated into the report rationale. The claims administrator stated that its decision was based on a September 26, 2014 office visit. The claims administrator did acknowledge that the applicant had a history of prior right shoulder surgery, prior right knee surgery, prior right carpal tunnel release surgery, prior cervical fusion surgery. In a handwritten note dated September 26, 2014, difficult to follow, not entirely legible, the applicant reported multifocal complaints of neck pain, right knee pain, right shoulder pain, and left knee pain. The note was difficult to follow, handwritten, not entirely legible, and comprised largely of preprinted checkboxes, with little to no narrative commentary. The applicant did have a history of prior right shoulder surgery, it was acknowledged. A sleep study, neurology consultation, internal medicine consultation, psychiatric consultation, pain management consultation, and urology consultation were all sought, along with 12 sessions of physical therapy and an H-Wave device. MRI studies of multiple body parts, including the right knee, left knee, lumbar spine, and right shoulder were all endorsed, again through preprinted checkboxes, with little to no narrative commentary. EMG testing of the upper and lower extremities was also sought. The applicant's case and care were complicated by comorbid diabetes, it was suggested at various points. In a Medical-legal Evaluation dated March 15, 2014, the applicant presented with multifocal pain complaints, including neck pain, right shoulder pain, low back pain, and right and left knee pain. The applicant was off of work and receiving

Workers' Compensation indemnity benefits, it was acknowledged. The applicant's comorbidities included diabetes, hypertension, and dyslipidemia. The applicant's medications included Norco, tramadol, metformin, losartan, Victoza, and topical compounds. The applicant reported ongoing complaints of bilateral knee pain, left greater than right exacerbated by standing, walking, kneeling, and squatting. The applicant had some issues with clicking, popping, and locking about the knees. The medical-legal evaluator noted that the applicant exhibited generalized tenderness about both left and right knees on exam with painful range of motion appreciated. The medical-legal evaluator placed the applicant off of work, on total temporary disability. The medical-legal evaluator stated that the applicant was a candidate for further surgery involving the right knee. There was no mention of the applicant's willingness to consider any surgery involving the left knee, however.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI of left knee: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 335.

Decision rationale: No clear diagnosis has been established involving the left knee here, although it appears that the applicant's presentation of knee pain, popping, clicking, locking, and pain with squatting, lifting, and carrying activities implies the presence of possible meniscal derangement involving the left knee. While the MTUS Guideline in ACOEM Chapter 13, Table 13-2 does acknowledge that MRI imaging can be employed to confirm a diagnosis of meniscus tear, ACOEM qualifies its recommendation by noting that such testing is indicated only if surgery is being considered or contemplated. Here, however, there was no mention of the applicant's willingness to consider any kind of surgical intervention involving the left knee. While the applicant's medical-legal evaluator stated that the applicant was willing to consider surgery involving the right knee, there was, however, no mention of the applicant's willingness to consider or contemplate surgery involving the seemingly less symptomatic left knee. The progress note on which the RFA sought comprised largely of preprinted checkboxes, with little-to-no narrative commentary. Given the lack of any statements on the part of either the attending provider or the medical-legal evaluator that the applicant would act on the results of the proposed knee MRI and consider surgical intervention involving the left knee, the request cannot be supported. Therefore, the request is not medically necessary.