

Case Number:	CM15-0005777		
Date Assigned:	01/20/2015	Date of Injury:	07/08/2014
Decision Date:	03/16/2015	UR Denial Date:	12/31/2014
Priority:	Standard	Application Received:	01/12/2015

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: California

Certification(s)/Specialty: Physical Medicine & Rehabilitation

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 44 year male who sustained a work related injury on July 8, 2014, when his pant leg got caught in a tractor and twisted his left knee. He complained of pain and popping in the knee with no improvement. X rays were negative for bone on bone osteoarthritis. Magnetic Resonance Imaging revealed cartilage loss of the knee. No surgery was required. A diagnosis of an internal derangement of the left knee was made. Treatment included an orthopedic consultation, anti-inflammatory medication and steroid therapy. Currently, on October 13, 2014, the injured worker continued to complain of left knee pain on limited range of motion. On December 31, 2014, a request for a service of Euflexxa Injection series of 3 to the left knee was non-certified by Utilization Review, noting the Official Disability Guidelines.

IMR ISSUES, DECISIONS AND RATIONALES

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

Euflexxa Injection Series of 3 to the Left Knee: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Criteria for Hyaluronic Acid Injections

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Knee & leg chapter, Hyaluronic injection

Decision rationale: The patient presents with unrated left knee pain exacerbated by walking. The patient's date of injury is 07/08/14. Patient is status post steroid injection to the right knee completed at an unspecified date at or around 01/15/15. The request is for EUFLEXXA INJECTION SERIES OF 3 TO THE LEFT KNEE. The RFA is dated 12/22/14. Physical examination dated 01/29/15 revealed no tenderness to palpation, mildly decreased range of motion on flexion and extension, negative drawer and McMurray signs. The patient is currently prescribed an unspecified NSAID. Diagnostic imaging included MRI of the left knee dated 10/02/14, significant findings include: "Medial and patellofemoral compartment areas of high grade partial thickness chondral loss with a near full thickness defect noted in the medial compartment measuring 1cm. Additional partial thickness chondral loss noted in the lateral compartment. " Patient is currently working regular duties. Regarding Hyaluronic injection, MTUS and ACOEM do not discuss, but ODG guidelines provide a thorough review. ODG guidelines recommend Hyaluronic injection for "severe arthritis" of the knee that have not responded to other treatments. Furthermore, ODG do not recommended for any other indications such as chondromalacia patellae, facet joint arthropathy, osteochondritis dissecans, patellofemoral arthritis, or patellofemoral syndrome -patellar knee pain. In this case, the patient suffers from chronic knee pain and MRI showed significant degeneration of the medial, patellofemoral, and lateral compartments. Review of the reports do not show evidence of prior injection of this type, document failure of conservative therapies such as NSAIDS and steroid injection to produce benefits. The requested trial of Euflexxa would appear reasonable. The request IS medically necessary.