

Case Number:	CM15-0105865		
Date Assigned:	06/10/2015	Date of Injury:	04/13/2003
Decision Date:	07/15/2015	UR Denial Date:	05/21/2015
Priority:	Standard	Application Received:	06/02/2015

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 55-year-old female who sustained an industrial injury on 04/13/2003. Diagnoses include patellofemoral arthritis, status-post right total knee with stiffness. Treatment to date has included diagnostic studies, status post total right knee arthroplasty on 01/09/2014, manipulation under anesthesia of the right knee on 03/19/2014, medications, and physical therapy. A physician progress note dated 04/20/2015 documents the injured worker recently had an AME and was told she might benefit from arthroscopic debridement and manipulation of her right knee. She is planning to retire because they were no longer able to use her in her modified position. Treatment requested is for orthopedic consultation.

IMR ISSUES, DECISIONS AND RATIONALES

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

Orthopedic Consultation: Overturned

Claims Administrator guideline: Decision based on MTUS ACOEM.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Practice Guidelines, 2nd Edition (2004), Independent medical examination and consultations. Ch: 7 page 127.

Decision rationale: This patient presents with severe right knee pain. The request is for an orthopedic consultation. The patient underwent right knee arthroscopy on 01/09/14 and manipulation under anesthesia on 03/19/14. There is no RFA provided and the date of injury is 04/13/03. The diagnoses include patellofemoral arthritis, status-post right total knee with stiffness. The provided progress reports do not include any physical examination, however the 06/01/15 report states, under 'objective findings', "Her knees are minimally tender. She walks with a normal gait today." It is noted that the patient underwent a recent AME and was told she may benefit from arthroscopic debridement and manipulation in her right knee. There are no medications listed in reports. The patient is in the process of retiring because her work is unable to accommodate the modified duties. ACOEM Practice Guidelines, 2nd Edition (2004), Chapter 7 page 127 states, "The occupational health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial factors are present, or when the plan or course of care may benefit from additional expertise. An independent medical assessment also may be useful in avoiding potential conflict(s) of interest when analyzing causation or when prognosis, degree of impairment, or work capacity requires clarification." The provided medical reports are extremely brief. The treater states in the 06/01/15 report, "This patient had a very difficult course initially with surgery and with her manipulation. I think she would best be served at the tertiary care facility I am requesting again consultation with a tertiary care facility." ACOEM recommends for consultations when a "diagnosis is uncertain" or "when the plan of care may benefit from additional expertise." It is obvious that this patient's primary physician and AME physician feel strongly that a consultation is necessary at the facility. Given the patient's ongoing pain despite prior operations and conservative care, an orthopedic consultation to discuss possible surgery outcomes appears reasonable. Therefore, the requested orthopedic consultation is medically necessary.