

Case Number:	CM15-0138350		
Date Assigned:	07/28/2015	Date of Injury:	09/08/1968
Decision Date:	08/28/2015	UR Denial Date:	06/23/2015
Priority:	Standard	Application Received:	07/16/2015

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: Texas, New York, California
 Certification(s)/Specialty: Preventive Medicine, Occupational Medicine

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 70-year-old who has filed a claim for chronic knee pain reportedly associated with an industrial injury of September 8, 1968. In a utilization review report dated June 23, 2015, the claims administrator failed to approve a request for a two-month trial of a Dynasplint device. The claims administrator referenced a June 18, 2015 progress note in its determination. The applicant's attorney subsequently appealed. In a procedure note dated July 9, 2015, the applicant received a viscosupplementation injection. In a letter dated June 18, 2015, the attending provider stated that the applicant had undergone earlier knee manipulation under anesthesia surgery status post failed total knee arthroplasty on February 13, 2015. The treating provider suggested that the applicant's range of motion could be ameliorated with the introduction of a Dynasplint device. In a June 18, 2015 progress note, the applicant reported ongoing complaints of knee pain. The attending provider posited that previous usage of a Dynasplint had ameliorated the applicant's range of motion to some extent. The attending provider suggested that continued usage of the Dynasplint in conjunction with a repeat manipulation under anesthesia procedure would prove particularly beneficial. The applicant was described as possessing 105 degrees of knee range of motion as of this point in time.

IMR ISSUES, DECISIONS AND RATIONALES

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

2 month trial of double jointed knee extension Dynasplint: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Knee & Leg (Acute & Chronic).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee, Static progressive stretch (SPS) therapy.

Decision rationale: Yes, the proposed Dynasplint (a.k.a. static progressive stretch therapy) device was medically necessary, medically appropriate, and indicated here. The request was framed as a request for usage of a Dynasplint device following planned repeat knee manipulation under anesthesia surgery, as stated in the June 18, 2015 progress note. The attending provider stated on June 18, 2015 that previous usage of the Dynasplint following an earlier knee manipulation under anesthesia procedure had ameliorated the applicant's knee range of motion. The attending provider suggested that the applicant undergo repeat manipulation under anesthesia procedure and employ the Dynasplint device postoperatively. The MTUS does not address the topic of Dynasplint devices. ODG's Knee Chapter, Static Progressive Stretch Therapy Device Topic, however, notes that static progressive stretch therapy can be employed as an adjunct to physical therapy within three months of manipulation surgery performed to improve range of motion. Here, thus, usage of the Dynasplint device following planned repeat knee manipulation under anesthesia surgery was in line with ODG's principles and parameters. Therefore, the request is medically necessary.