

Case Number:	CM15-0160834		
Date Assigned:	09/02/2015	Date of Injury:	04/15/2000
Decision Date:	10/20/2015	UR Denial Date:	07/30/2015
Priority:	Standard	Application Received:	08/17/2015

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, Pain Management

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 64 year old female who sustained an industrial injury on 04-15-2000. The injured worker was diagnosed with left knee osteoarthritis and chondromalacia. No surgical interventions were documented. Treatment to date for the left knee consisted of diagnostic testing, steroid injection in February 2015 and Synvisc injection on May 21, 2015. According to the primary treating physician's progress report on July 2, 2015 the injured worker reported returns of symptoms to the left knee. Inspection of the knee noted no erythema, deformity or edema. Examination demonstrated tenderness along the medial joint line with full knee range of motion with patellofemoral crepitus noted. Ligaments were stable and ambulation was normal. No motor strength or sensory deficits were evident and distal pulses were intact. Current medications were not documented. Treatment plan consists of return for follow-up in 2 months, conservative treatment and the current request for knee orthosis, double upright, thigh and calf, with adjustable flexion and extension joint for purchase, soft material for bilateral knees for purchase, lower extremity orthotic soft interface for purchase and bilateral knees and lower extremity orthotic hybrid lamination for purchase. A progress report dated February 23, 2015 indicates that x-rays of the knee showed "medial compartment joint space narrowing with subchondral sclerosis and marginal osteophytes."

IMR ISSUES, DECISIONS AND RATIONALES

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

Knee orthosis, double upright, thigh and calf, with adjustable flexion and extension joint (purchase): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Integrated Treatment/Disability Duration Guidelines, Knee & Leg Chapter, Criteria for the use of knee braces.

MAXIMUS guideline: Decision based on MTUS Knee Complaints 2004, Section(s): Initial Care. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee Chapter, Knee brace, Unloader Brace.

Decision rationale: Regarding the request for Knee orthosis, double upright, thigh and calf, with adjustable flexion and extension joint (purchase), Occupational Medicine Practice Guidelines state that a brace can be used for patellar instability, anterior cruciate ligament tear, or medial collateral ligament instability although its benefits may be more emotional than medical. Usually a brace is necessary only if the patient is going to be stressing the knee under load, such as climbing ladders or carrying boxes. For the average patient, using a brace is usually unnecessary. ODG recommends valgus knee braces for knee osteoarthritis. ODG also supports the use of knee braces for knee instability, ligament insufficiency, reconstructed ligament, articular defect repair, avascular necrosis, meniscal cartilage repair, painful failed total knee arthroplasty, painful high tibial osteotomy, painful unicompartmental osteoarthritis, and tibial plateau fracture. ODG guidelines state that unloader braces are designed specifically to reduce pain and disability associated with osteoarthritis of the medial compartment of the knee. Within the documentation available for review, it is unclear what type of knee brace is being requested. Additionally, it is unclear why a custom knee brace is required rather than an off-the-shelf knee brace. In the absence of clarity regarding those issues, the currently requested Knee orthosis, double upright, thigh and calf, with adjustable flexion and extension joint (purchase) is not medically necessary.

Soft material for bilateral knees (purchase): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Integrated Treatment/Disability Duration Guidelines, Knee & Leg Chapter, Criteria for the use of knee braces.

MAXIMUS guideline: Decision based on MTUS Knee Complaints 2004, Section(s): Initial Care. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee Chapter, Knee brace, Unloader Brace.

Decision rationale: Regarding the request for Soft material for bilateral knees (purchase) for Knee orthosis, Occupational Medicine Practice Guidelines state that a brace can be used for patellar instability, anterior cruciate ligament tear, or medial collateral ligament instability although its benefits may be more emotional than medical. Usually a brace is necessary only if the patient is going to be stressing the knee under load, such as climbing ladders or carrying

boxes. For the average patient, using a brace is usually unnecessary. ODG recommends valgus knee braces for knee osteoarthritis. ODG also supports the use of knee braces for knee instability, ligament insufficiency, reconstructed ligament, articular defect repair, avascular necrosis, meniscal cartilage repair, painful failed total knee arthroplasty, painful high tibial osteotomy, painful unicompartmental osteoarthritis, and tibial plateau fracture. ODG guidelines state that unloader braces are designed specifically to reduce pain and disability associated with osteoarthritis of the medial compartment of the knee. Within the documentation available for review, it is unclear what type of knee brace is being requested. Additionally, it is unclear why a custom knee brace is required rather than an off-the-shelf knee brace. In the absence of clarity regarding those issues, the currently requested Soft material for bilateral knees (purchase) for Knee orthosis is not medically necessary.

Lower extremity orthotic soft interface (purchase) bilateral knees: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Integrated Treatment/Disability Duration Guidelines, Knee & Leg Chapter, Criteria for the use of knee braces.

MAXIMUS guideline: Decision based on MTUS Knee Complaints 2004, Section(s): Initial Care. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee Chapter, Knee brace, Unloader Brace.

Decision rationale: Regarding the request for Lower extremity orthotic soft interface (purchase) bilateral knees for Knee orthosis, Occupational Medicine Practice Guidelines state that a brace can be used for patellar instability, anterior cruciate ligament tear, or medial collateral ligament instability although its benefits may be more emotional than medical. Usually a brace is necessary only if the patient is going to be stressing the knee under load, such as climbing ladders or carrying boxes. For the average patient, using a brace is usually unnecessary. ODG recommends valgus knee braces for knee osteoarthritis. ODG also supports the use of knee braces for knee instability, ligament insufficiency, reconstructed ligament, articular defect repair, avascular necrosis, meniscal cartilage repair, painful failed total knee arthroplasty, painful high tibial osteotomy, painful unicompartmental osteoarthritis, and tibial plateau fracture. ODG guidelines state that unloader braces are designed specifically to reduce pain and disability associated with osteoarthritis of the medial compartment of the knee. Within the documentation available for review, it is unclear what type of knee brace is being requested. Additionally, it is unclear why a custom knee brace is required rather than an off-the-shelf knee brace. In the absence of clarity regarding those issues, the currently requested Lower extremity orthotic soft interface (purchase) bilateral knees for Knee orthosis is not medically necessary.

Lower extremity orthotic hybrid lamination (purchase) bilateral knees: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Integrated Treatment/Disability Duration Guidelines, Knee & Leg Chapter, Criteria for the use of knee braces.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee Chapter, Knee brace, Unloader Brace.

Decision rationale: Regarding the request for Lower extremity orthotic hybrid lamination (purchase) bilateral knees, Occupational Medicine Practice Guidelines state that a brace can be used for patellar instability, anterior cruciate ligament tear, or medial collateral ligament instability although its benefits may be more emotional than medical. Usually a brace is necessary only if the patient is going to be stressing the knee under load, such as climbing ladders or carrying boxes. For the average patient, using a brace is usually unnecessary. ODG recommends valgus knee braces for knee osteoarthritis. ODG also supports the use of knee braces for knee instability, ligament insufficiency, reconstructed ligament, articular defect repair, avascular necrosis, meniscal cartilage repair, painful failed total knee arthroplasty, painful high tibial osteotomy, painful unicompartmental osteoarthritis, and tibial plateau fracture. ODG guidelines state that unloader braces are designed specifically to reduce pain and disability associated with osteoarthritis of the medial compartment of the knee. Within the documentation available for review, it is unclear what type of knee brace is being requested. Additionally, it is unclear why a custom knee brace is required rather than an off-the-shelf knee brace. In the absence of clarity regarding those issues, the currently requested Lower extremity orthotic hybrid lamination (purchase) bilateral knees is not medically necessary.