

Case Number:	CM15-0205215		
Date Assigned:	10/22/2015	Date of Injury:	06/28/2010
Decision Date:	12/09/2015	UR Denial Date:	09/24/2015
Priority:	Standard	Application Received:	10/19/2015

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 54-year-old who has filed a claim for chronic knee pain reportedly associated with an industrial injury of June 28, 2010. In a Utilization Review report dated September 24, 2015, the claims administrator failed to approve a request for Euflexxa (viscosupplementation) injection to the bilateral knees. The claims administrator referenced an August 26, 2015 office visit in its determination. The applicant and/or applicant's attorney personally appealed. MRI imaging of left knee dated December 12, 2014 was notable for advanced multi-compartmental arthritic changes. On May 12, 2015, the applicant reported ongoing complaints of knee pain reportedly attributed to bilateral knee arthritis. The applicant had superimposed hip arthritic changes, it was reported. Work restrictions were endorsed. It was not clear whether the applicant was or was not working with said limitations in place. Ongoing complaints of knee popping and clicking were noted. On June 17, 2015, it was again stated that the applicant had ongoing complaints of popping, locking, and crepitation about the knees. Tramadol was endorsed for ongoing knee arthritic complaints. On August 26, 2015, the applicant again reported continuing difficulty ambulating secondary to reportedly advanced knee arthritis. Euflexxa (viscosupplementation) injections were sought.

IMR ISSUES, DECISIONS AND RATIONALES

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

Euflexxa injection X 3 bilateral knees: 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), Knee and Leg Chapter.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Occupational Medicine Practice Guidelines, 3rd ed., Knee Disorders, page 687.

Decision rationale: Yes, the proposed viscosupplementation (Euflexxa) injections were medically necessary, medically appropriate, and indicated here. The MTUS does not address the topic. However, the Third Edition ACOEM Guidelines Knee Disorders Chapter notes that viscosupplementation (Euflexxa) injections are indicated in the treatment of moderate-to-severe knee osteoarthritis, as was seemingly present here on or around the date in question. The applicant reported issues with kneeling, bending, squatting, standing, and walking, secondary to issues with knee arthritis, the treating provider reported. Moving forward with the proposed viscosupplementation (Euflexxa) injection was, thus indicated. Therefore, the request was medically necessary.