

Case Number:	CM15-0212941		
Date Assigned:	11/03/2015	Date of Injury:	01/29/2013
Decision Date:	12/15/2015	UR Denial Date:	10/19/2015
Priority:	Standard	Application Received:	10/28/2015

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: Massachusetts

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:

This is a 61-year-old male with a date of industrial injury 1-29-2013. The medical records indicated the injured worker (IW) was treated for right knee internal derangement, weakness, lateral meniscus tear, medial meniscus tear and osteoarthritis; status post arthroscopy (2014); and status post Synvisc injections (3) (2014). In the progress notes (10-6-15), the IW reported popping and locking in the right knee with constant weakness and giving out with walking. His symptoms were more extensive than at the previous visit (9-8-15). On examination (10-6-15 notes), the right knee was tender to palpation at the medial and lateral joint line. Manual muscle testing was 4 out of 5 McMurray's sign was positive. There was crepitus with range of motion. Objective findings were the same on 8-10-15, with range of motion 110 degrees flexion. Treatments included Synvisc injections, Motrin and arthroscopic surgery. The IW was on modified work duty. The right knee x-ray on 2-2-15 showed osteoarthritis principally in the medial joint compartment and mild degenerative change in the articular surface of the patella. MRI on 8-19-15 showed a suspected tear involving the entire lateral meniscus and a small radial tear of the anterior horn of the medial meniscus; there were areas of full-thickness cartilage loss in the posterior weight-bearing portion of the medial femoral condyle, thinning articular cartilage over the medial tibial plateau and suspected thinning of the patellofemoral articular cartilage. The clinical documentation supported the diagnosis of osteoarthritis; there was crepitus with motion and no immediate plan for arthroplasty. Previous Synvisc injections were in 2014. A Request for Authorization was received for Synvisc injections (3) for the right knee. The Utilization Review on 10-19-15 non-certified the request for Synvisc injections (3) for the right knee.

IMR ISSUES, DECISIONS AND RATIONALES

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

Synvisc injections (3), right knee: Upheld

Claims Administrator guideline: Decision based on MTUS Knee Complaints 2004.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee & Leg (Acute & Chronic): Hyaluronic acid injections.

Decision rationale: The claimant sustained a work injury in January 2013 and continues to be treated for right knee pain. He underwent arthroscopic surgery in May 2014. Synvisc injections were performed in November 2014. An x-ray of the right knee in February 2015 showed findings of mild medial compartment arthritis. When seen, he was having ongoing right knee pain. Physical examination findings included decreased range of motion with joint line tenderness, crepitus, and decreased strength. Authorization is being requested for a second series of Synvisc injections. Hyaluronic acid injections are recommended as a possible option for severe osteoarthritis for patients who have not responded adequately to recommended conservative treatments to potentially delay total knee replacement. A repeat series of injections can be considered if there is a documented significant improvement in symptoms for 6 months or more and the symptoms recur. In this case, the claimant's response to the prior series of injections is not documented. There is no diagnosis of severe osteoarthritis with imaging in February 2015 showing only mild medial compartment degeneration. The requested repeat series of injections is not considered medically necessary.