

Case Number:	CM15-0218414		
Date Assigned:	11/10/2015	Date of Injury:	06/20/2015
Decision Date:	12/30/2015	UR Denial Date:	10/01/2015
Priority:	Standard	Application Received:	11/05/2015

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 [REDACTED] beneficiary who has filed a claim for knee pain reportedly associated with an industrial injury of June 20, 2015. In a Utilization Review report dated October 1, 2015, the claims administrator failed to approve requests for MRI imaging of the left knee. A September 15, 2015 office visit was referenced in the determination. The applicant's attorney subsequently appealed. On said September 15, 2015 office visit, the applicant reported ongoing issues with knee pain. Painful range of motion was noted with negative provocative testing, including the negative McMurray maneuver. The applicant was asked to undergo knee MRI imaging. Physical therapy and work restrictions were endorsed, and overall commentary was sparse. Additional physical therapy was ordered via an RFA form of September 16, 2015. The treating provider suggested that the applicant had a gastrocnemius tear. On October 15, 2015, the applicant was placed off of work, on total temporary disability. MRI imaging of the knee was again sought. The applicant exhibited a small effusion about the knee and -10 to 120 degrees of knee range of motion. Knee MRI imaging was again seemingly endorsed.

IMR ISSUES, DECISIONS AND RATIONALES

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

MRI of The Left Knee: Overturned

Claims Administrator guideline: Decision based on MTUS Knee Complaints 2004, Section(s): Special Studies.

MAXIMUS guideline: Decision based on MTUS Knee Complaints 2004, Section(s): Special Studies. Decision based on Non-MTUS Citation ACOEM Occupational Medicine Practice Guidelines, 3rd ed., Knee Disorders, pg. 449.

Decision rationale: Yes, the proposed MRI of the knee was medically necessary, medically appropriate, or indicated here. While the MTUS Guideline in ACOEM Chapter 13, page 341 notes that special studies are not needed to evaluate most knee complaints until after a period of conservative care and observation, here, however, the request in question was initiated approximately 3 months after the stated date of injury, June 20, 2015. It did not appear that the applicant's reported gastrocnemius tear had responded favorably to conservative treatment in form of time, work restrictions, physical therapy, etc. Moving forward with MRI imaging was, thus, indicated in the clinical context present here, particularly in light of the fact that the Third Edition ACOEM Guidelines Knee Disorders Chapter notes that MRI imaging is recommended in the more severe gastrocnemius strains or tears to evaluate the degree of muscle tearing. Here, the claimant's failure to return to the work at the 3- to 4-month mark from the date of injury did suggest that the claimant had a more severe gastrocnemius tear, which did warrant further investigation via MRI imaging. Therefore, the request was medically necessary.