

<b>Case Number:</b>	CM15-0041084		
<b>Date Assigned:</b>	03/11/2015	<b>Date of Injury:</b>	05/16/2008
<b>Decision Date:</b>	04/21/2015	<b>UR Denial Date:</b>	02/27/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/04/2015

### 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

### 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 62-year-old female, who sustained an industrial injury on 5/16/2008. The current diagnosis is severe medial compartment arthritis of the right knee. According to the progress report dated 1/28/2015, the injured worker complains of pain in right knee. The current medications are Soma, Flexeril, and Percocet. Treatment to date has included medications, X-rays, MRI, chiropractic, ultrasound, and physical therapy. Per notes, the injured worker would benefit from a total knee replacement; however, this has not been approved by workers compensation. The current plan of care includes one (1) referral for orthopedic visits (transfer of care) for the right knee.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**One (1) referral for orthopedic visits (transfer of care) for the right knee:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Guidelines, Chapter 7, page 127.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Practice Guidelines, 2nd Edition (2004), Independent medical examination and consultations. Ch: 7 page 127.

**Decision rationale:** The patient presents with unrated lower back and right knee pain. The patient's date of injury is 05/16/08. Patient has no documented surgical history directed at these complaints. The request is for ONE -1- REFERRAL FOR ORTHOPEDIC VISITS - TRANSFER OF CARE - FOR THE RIGHT KNEE. The RFA is dated 02/17/15. Physical examination dated 02/20/15 reveals reduced range of motion of the right knee on flexion, trace patellofemoral crepitus, and slight medial pseudolaxity without endpoint. The patient is currently prescribed Diclofenac. Diagnostic imaging included MRI of the right knee dated 02/20/15, significant findings include: "extensive degenerative tearing of the residual posterior horn and body of the medial meniscus, diffuse full-thickness chondral loss throughout the entire medial femoral tibial compartment, diffuse high-grade to full-thickness chondral loss over the patella fluid dissecting into the myotendonous junction and distal muscle belly of the biceps femoris muscle." Patient is totally disabled. ACOEM Practice Guidelines, 2nd Edition (2004), page 127 has the following: The occupational health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial factors are present, or when the plan or course of care may benefit from additional expertise. In regard to the referral/transfer of care to an orthopedic specialist, the request appears reasonable. Progress notes provided indicate that this patient is currently in the preoperative phases for a right knee replacement; though UR dated 02/27/15 denies the referral on the grounds that the surgery has not yet been approved. Regardless of whether or not the planned operation is approved, the treater is transferring care to a specialist to improve this patient's course of care. ACOEM guidelines indicate that a treater is justified in seeking a specialist opinion in cases where additional expertise is needed. Therefore, the request IS medically necessary.