

Case Number:	CM15-0060583		
Date Assigned:	04/06/2015	Date of Injury:	01/03/2011
Decision Date:	05/11/2015	UR Denial Date:	03/05/2015
Priority:	Standard	Application Received:	03/30/2015

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 57-year-old male, who sustained an industrial injury on 1/03/2011. Diagnoses include chondromalacia and osteoarthritis lower leg. Treatment to date has not been provided. Per the Orthopedic Progress Report dated 2/06/2015, the injured worker reported ongoing pain in his bilateral knees. Physical examination revealed medial and lateral joint line tenderness with limited range of motion of his knees. The plan of care included, and authorization was requested for synvisc one injections of the bilateral knees.

IMR ISSUES, DECISIONS AND RATIONALES

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

Synvisc one injections of 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) Knee & Leg (updated 02/27/15).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official disability guidelines, Knee & Leg (Acute & Chronic) Chapter, under Hyaluronic acid injections.

Decision rationale: The patient presents with pain in the bilateral knees. The request is for synvisc one injections of bilateral knees. The RFA provided is dated 02/19/15 and the patient's date of injury is 01/03/11. The patient has diagnoses of chondromalacia and osteoarthritis lower leg. Per 02/06/15 report, physical examination revealed medial and lateral joint line tenderness with limited range of motion of his knees. There are no image studies provided for review and treatment to date is unknown. The patient remains permanent and stationary. ODG Guidelines, Knee & Leg (Acute & Chronic) Chapter, under Hyaluronic acid injections states: "Recommended as a possible option for severe osteoarthritis for patients who have not responded adequately to recommended conservative treatments (exercise, NSAIDs or acetaminophen), to potentially delay total knee replacement, but in recent quality studies the magnitude of improvement appears modest at best. Criteria for Hyaluronic acid injections: Generally performed without fluoroscopic or ultrasound guidance; Hyaluronic acid injections are not recommended for any other indications such as chondromalacia patellae, facet joint arthropathy, osteochondritis dissecans, or patellofemoral arthritis, patellofemoral syndrome (patellar knee pain), plantar nerve entrapment syndrome, or for use in joints other than the knee (e.g., ankle, carpo-metacarpal joint, elbow, hip, metatarso-phalangeal joint, shoulder, and temporomandibular joint) because the effectiveness of hyaluronic acid injections for these indications has not been established." In this case, only one progress report was provided and it is only page 2 of the progress report. Per 02/06/15 report, treater states, "He responded well to viscosupplementation in the past. His BMI is too high to consider total knee replacement. Since he had a good response before, I recommend Synvisc-One injections for both knees." The patient has not been diagnosed with osteoarthritis for which the injections are generally indicated. In fact, the patient has been diagnosed with chondromalacia patella and ODG guidelines state that "there is insufficient evidence for other conditions, including patellofemoral arthritis, chondromalacia patellae, osteochondritis dissecans, or patellofemoral syndrome (patellar knee pain)." Therefore, the request is not medically necessary.