

Case Number:	CM15-0086531		
Date Assigned:	05/08/2015	Date of Injury:	07/03/2010
Decision Date:	06/15/2015	UR Denial Date:	04/21/2015
Priority:	Standard	Application Received:	05/05/2015

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: 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 (IW) is a 48-year-old female who sustained an industrial injury on 07/03/2010. Diagnoses include chondromalacia of the patella. Treatments to date include medications, physical therapy, ice, KinesioTape, steroid injection, left knee arthroscopy and home exercises. According to the progress notes dated 3/4/15, the IW reported left leg pain extending into the thigh and foot with some tingling in the left toes and some soreness and swelling in the left knee. The left knee exam showed mild effusion and lateral joint line pain with motion from 5 to 135 degrees. She was working six hours per day and was released to increase to eight hours per day. Progress notes from October 2014 document 40% improvement in left knee pain after three Orthovisc injections. A request was made for Orthovisc injection to the left knee (1 x 3 weeks).

IMR ISSUES, DECISIONS AND RATIONALES

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

Orthovisc injection to the left knee (1x3 weeks): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines Knee Chapter: Hyaluronic Acid Injections.

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 Chapter, Hyaluronic acid injections.

Decision rationale: The patient was injured on 07/03/10 and presents with low back pain and left leg pain which extends to her left thigh and left foot. The request is for an ORTHOVISC INJECTION TO THE LEFT KNEE. There is no RFA provided and the patient is working on modified work duty. Treatments to date include medications, physical therapy, ice, KinesioTape, steroid injection, left knee arthroscopy and home exercises. The patient had 40% improvement in left knee pain after three Orthovisc injections (date of injections are not provided). 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. She is diagnosed with chondromalacia of the patella. Examination of the left knee reveals mild effusion and there is lateral joint line pain with motion from 5 to 135 degrees. There is no documentation of "severe" arthritis of the joint and no X-ray or MRI reports were provided showing such. In this case, ODG guidelines clearly state that Hyaluronic acid injections are not recommended for any other indications such as chondromalacia patellae. Therefore, the requested Orthovisc injection to the left knee IS NOT medically necessary.