

Case Number:	CM14-0121315		
Date Assigned:	08/06/2014	Date of Injury:	01/11/2012
Decision Date:	10/08/2014	UR Denial Date:	07/17/2014
Priority:	Standard	Application Received:	07/31/2014

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. The expert reviewer is Board Certified in Orthopedic Surgery and is licensed to practice in Georgia. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

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 claimant is a 51-year-old injured on January 11, 2012. The clinical records provided for review document continued complaints of pain in the right knee since the time of injury. The report of an MRI dated April 28, 2014 identified complex tearing of the medial meniscus, moderate articular cartilage loss to the medial compartment, an MCL strain, chronic in nature, as well as articular cartilage loss in the lateral compartment and patella. Treatment to date has included physical therapy, medication management and activity restrictions. The clinical assessment of June 10, 2014 revealed ongoing knee pain with examination showing a normal gait pattern, no swelling, two to 135 degrees range of motion, positive McMurray's testing, and negative instability and medial joint line tenderness. The diagnosis was meniscal tearing and the recommendation was made for surgical meniscectomy versus repair.

IMR ISSUES, DECISIONS AND RATIONALES

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

Right knee arthroscopy partial medial meniscectomy vs. repair debridement: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM. Decision based on Non-MTUS Citation ODG- Knee & Leg Chapter

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints
Page(s): 344-345.

Decision rationale: California ACOEM Guidelines do not support the request for right knee arthroscopy with partial meniscectomy and debridement. The medical records document that the claimant has meniscal pathology, there is also a high degree of underlying degenerative arthritis near endstage of the medial compartment. The ACOEM Guidelines do not recommend meniscal surgery in the setting of advanced degenerative arthritis. Given the claimant's timeframe from injury and significant underlying cartilage loss, the request for right knee arthroscopy with partial meniscectomy and debridement is not medically necessary or appropriate.