MAXIMUS Federal Services

Case Number:	CM14-0182395		
Date Assigned:	11/07/2014	Date of Injury:	12/05/2005
Decision Date:	12/16/2014	UR Denial Date:	10/14/2014
Priority:	Standard	Application Received:	11/03/2014

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 Occupational Medicine and is licensed to practice in California. 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 applicant is a represented [redacted] employee who has filed a claim for chronic neck, shoulder, and knee pain reportedly associated with an industrial injury of December 5, 2005. In a Utilization Review Report dated October 14, 2014, the claims administrator denied a request for bilateral hinged knee braces. The applicant's attorney subsequently appealed.In a progress note dated September 18, 2014, the applicant reported ongoing complaints of left knee pain secondary to knee arthritis and meniscal derangement of the same. The attending provider suggested obtaining an MRI imaging of the left knee. A left knee hinged knee brace was sought, along with eight sessions of physical therapy. The applicant's work status was not stated. The applicant did state that her knee pain was exacerbated by kneeling and squatting task. The applicant's gait was likewise not described. In an August 25, 2014 progress note, the applicant was described as having persistent complaints of shoulder, low back, and knee pain. The attending provider suggested that the applicant return to work on a full-time basis with the Department [redacted]. In a medical-legal evaluation dated July 23, 2014, the applicant reported ongoing complaints of musculoskeletal pain with ancillary complaints of reflux and psychological stress. The applicant was working, it was acknowledged. The applicant was using Norco, Motrin, Mylanta, and Naprosyn for pain relief. The applicant was described as obese and experiencing complaints of reflux. The applicant had apparently been off of work for large portions of the claim but had eventually returned to work, it was stated. The applicant's job title was that of typist-clerk, the medical-legal evaluator noted.

IMR ISSUES, DECISIONS AND RATIONALES

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

Bilateral hinged knee braces for stability: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 340.

Decision rationale: As noted in the MTUS-adopted Guidelines in Chapter 13, page 340, knee braces are usually not needed for the average applicant. Page 340 of the ACOEM Practice Guidelines notes that knee braces are generally necessary only if an applicant is going to be stressing the knee under load, such as by climbing ladders or carrying boxes. Here, there was no mention of the applicant's job as a typist-clerk entailing significant amounts of climbing ladders and/or tearing boxes. The applicant's gait, it is further noted, was not clearly described or characterized on several office visits, referenced above, which, furthermore, suggested that the bulk of the applicant's symptoms pertain to the symptomatic left knee, making it unclear why bilateral knee braces were sought here. Therefore, the request is not medically necessary.