

<b>Case Number:</b>	CM14-0047078		
<b>Date Assigned:</b>	07/02/2014	<b>Date of Injury:</b>	12/24/2008
<b>Decision Date:</b>	08/07/2014	<b>UR Denial Date:</b>	03/24/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	04/15/2014

### 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 knee pain reportedly associated with an industrial injury of December 24, 2008. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representations; transfer of care to and from various providers in various specialties; and earlier knee meniscectomy surgery. In a Utilization Review Report dated March 24, 2014, the claims administrator denied a request for Orthovisc (viscosupplementation) injections on the grounds that the attending provider failed to provide postoperative diagnostic imaging reports which would have established a diagnosis of knee arthritis. The applicant's attorney subsequently appealed, on March 16, 2014. In a January 21, 2014 progress note, the applicant was described as in the process of relocating to Florida. The applicant presented with neck and shoulder pain. The applicant had multiple palpable trigger points about the cervical paraspinal musculatures. Physical therapy, Fioricet, Flector patches, topical compounds, and trigger point injections were endorsed. In a request for authorization form dated March 18, 2014, the applicant was described as 61 years old. In a March 11, 2014 progress note, the applicant was described as overweight, with a BMI of 29. Physical therapy, Flector, topical compounds, and Fioricet were all endorsed. It was again stated that the applicant's primary pain generators were the neck, headaches, and shoulder. On February 3, 2014, the applicant was described as having persistent knee pain status post meniscectomy and chondroplasty. It was stated that the applicant was given full activities. The applicant stated that she had not had any viscosupplementation injections formerly. The applicant was given a diagnosis of knee pain status post meniscectomy. Crepitation was noted about the patella with joint line tenderness appreciated. A three-part Orthovisc (viscosupplementation) injection was sought.

## **IMR ISSUES, DECISIONS AND RATIONALES**

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

**Orthovisc Injection right knee 1x 3 weeks:** Overturned

**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 and Leg.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on the Non-MTUS Other Medical Treatment Guideline or Medical Evidence: ACOEM Practice Guidelines, Third Edition, Knee Chapter, Viscosupplementation Injections section..

**Decision rationale:** The MTUS does not address the topic. As noted in the Third Edition ACOEM Guidelines Knee Chapter, viscosupplementation injections are indicated in the treatment of knee arthritis and in the treatment of postoperative knee pain following earlier meniscectomy surgery. In this case, the applicant has apparently had a prior meniscectomy surgery and has developed pain complaints following the same. It is further noted that, given the applicant's age (62), obesity (BMI of 29), history of prior meniscectomy surgery, complaints of knee pain, and issues with crepitation and joint line tenderness appreciated on a recent office visit of early 2014, taken together, do suggest that the applicant likely has some degree of knee arthritis for which viscosupplementation injections, are, per ACOEM, indicated. Therefore, the request is medically necessary.