

Case Number:	CM14-0212865		
Date Assigned:	12/30/2014	Date of Injury:	10/30/2013
Decision Date:	02/28/2015	UR Denial Date:	12/02/2014
Priority:	Standard	Application Received:	12/18/2014

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. 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: Texas, Ohio, California
 Certification(s)/Specialty: Preventive Medicine, Occupational Medicine

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 October 30, 2013. In a Utilization Review Report dated December 2, 2014, the claims administrator denied a request for Orthovisc (viscosupplementation) injections. The claims administrator stated that it was not certain whether the applicant carried a diagnosis of osteoarthritis or not. The claims administrator did not invoke or incorporate any guidelines into its rationale, but stated that its decision was based on an October 31, 2014 progress note. The applicant's attorney subsequently appealed. In a November 25, 2014 progress note, the applicant reported persistent complaints of knee pain some 14 weeks removed from earlier knee arthroscopy. The applicant was 56 years old. The applicant received a corticosteroid injection and had received physical therapy. X-rays of the knee dated November 4, 2013 demonstrated mild arthritis while MRI imaging of the knee dated February 18, 2014 demonstrated more advanced degenerative changes and chondromalacic changes. Work restrictions, Norco, physical therapy, and a cane were endorsed. A July 22, 2014 progress note suggested that the applicant was working regular duty as of that point in time.

IMR ISSUES, DECISIONS AND RATIONALES

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

Orthovisc Injections Left Knee: Overturned

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Practice Guidelines, Third Edition, Knee Chapter, Viscosupplementation Injections.

Decision rationale: The MTUS does not address the topic. However, the Third Edition ACOEM Guidelines notes that viscosupplementation (Orthovisc) injections are recommended as an option in the treatment of moderate-to-severe knee osteoarthritis and have also been employed in the treatment of knee pain after knee arthroscopy. Here, the applicant is 56 years old. The applicant has varying degrees of arthritis noted on MRI imaging and/or plain film imaging. The applicant has failed conventional physical therapy and a knee arthroscopy. Moving forward with viscosupplementation (Orthovisc) injections, thus, was/is indicated. Therefore, the request was medically necessary.