

Case Number:	CM14-0214822		
Date Assigned:	01/07/2015	Date of Injury:	05/02/2014
Decision Date:	03/03/2015	UR Denial Date:	11/24/2014
Priority:	Standard	Application Received:	12/22/2014

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 knee and leg pain reportedly associated with an industrial injury of May 2, 2014. In a Utilization Review Report dated November 24, 2014, the claims administrator denied a request for an orthopedic knee surgery consultation. The decision was based on a November 14, 2014 progress note at which point the applicant complained of 6-8/10 knee pain. The applicant had a history of previous knee surgery and has reportedly failed medications, physical therapy, acupuncture, and a knee brace, the claims administrator acknowledged. The claims administrator stated that the applicant had already received approval for a knee meniscectomy procedure through another knee surgeon. The applicant's attorney subsequently appealed. On January 30, 2015, the applicant's primary treating provider stated that the applicant wished to pursue a second opinion knee surgery consultation before moving forward with knee surgery for left knee meniscal tear. This knee had previously been operated upon, it was acknowledged. The applicant was using Norco for pain relief. Work restrictions were endorsed. It did not appear that the applicant was working with said limitations in place.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 orthopedic consultation for second opinion: Overturned

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 343-345. Decision based on Non-MTUS Citation Surgical considerations

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 343, 344.

Decision rationale: As noted in the MTUS Guideline in ACOEM Chapter 13, page 344, arthroscopic partial meniscectomy surgery usually has a success rate for applicants who have clear evidence of a meniscal tear. The MTUS Guideline in ACOEM Chapter 13, page 343 further notes that referral for surgical consultation may be indicated in applicants who have activity limitations for more than one month who have failed to increase range of motion and strength of the musculature around the knee through exercise programs. Here, the applicant has a clinically evident, radiographically confirmed left knee meniscal tear. The applicant is apparently hesitant to pursue a surgical remedy without obtaining a consultation for a second opinion orthopedic knee surgeon. The request, thus, is indicated so as to ensure that the applicant has no doubts before moving forward with the planned surgical procedure. Therefore, the request is medically necessary.