

Case Number:	CM14-0218627		
Date Assigned:	01/08/2015	Date of Injury:	09/04/2014
Decision Date:	03/09/2015	UR Denial Date:	12/22/2014
Priority:	Standard	Application Received:	12/30/2014

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: California

Certification(s)/Specialty: Orthopedic Surgery, Sports 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 injured worker is a 48-year-old male who reported an injury on 09/04/2014. There was a Request for Authorization submitted for 11/10/2014. The documentation of 11/10/2014 revealed the injured worker was in the process of being scheduled for an arthroscopic ACL reconstruction. The examination was noted to be unchanged and the injured worker had limited range of motion particularly at extremes secondary to pain and instability of the knee. The diagnosis was ACL tear right knee. The injured worker underwent an MRI of the right knee which revealed postsurgical changes from the prior anterior cruciate ligament repair with metallic susceptibility artifact. There was a complex tear involving the posterior horn and body of the medial meniscus. There were degenerative changes in the posterior horn of the lateral meniscus. The anterior horns were intact. The anterior cruciate ligament graft was intact. There was tendinosis of the posterior cruciate ligament. There was chondromalacia of the patella and chondromalacia of the femoral cartilage in both the medial and lateral compartments and there were postsurgical changes in the Hoffa fat pad. There was an x-ray of the right knee which revealed a high degree of clinical suspicion for an occult fracture on 09/05/2014. Prior therapies included physical therapy. The specific medications were not provided.

IMR ISSUES, DECISIONS AND RATIONALES

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

Right knee reconstruction: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 344. Decision based on Non-MTUS Citation Official Disability Guidelines: Knee Chapter, Anterior cruciate ligament (ACL) reconstruction

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 343-345.

Decision rationale: The American College of Occupational and Environmental Medicine indicates that surgical consultation is appropriate for injured workers who have activity limitation for more than 1 month and failure of an exercise program to increase range of motion and strength of the musculature around the knee. The clinical documentation submitted for review indicated the injured worker had objective findings on MRI. However, there was a lack of documentation of objective findings as it was indicated the examination was the same as the previous examination. The clinical documentation submitted for review indicated the injured worker had previously been treated with therapy. However, there was a lack of documentation of a failure of conservative care. Additionally, the request as submitted failed to indicate the specific surgical intervention that was being requested. Given the above and the lack of documentation and clarification, the request for right knee reconstruction is not medically necessary.