

Case Number:	CM15-0003570		
Date Assigned:	01/16/2015	Date of Injury:	02/06/1993
Decision Date:	03/16/2015	UR Denial Date:	01/07/2015
Priority:	Standard	Application Received:	01/07/2015

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: Arizona, Michigan

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 injured worker is an 88 year old female, who sustained an industrial injury on 02/06/1993. She has reported subsequent low back pain, neck and knee pain. The diagnoses have included sprain/strain of the cervical and lumbar spine, sprain/strain of the right wrist, herniated cervical and lumbar discs, osteoarthritis of the right and left knee, and status post right and left knee arthroscopy and meniscectomy. Treatment to date has included oral pain medication, application of heat and ice, lumbar back brace and Euflexxa injections. Currently the injured worker complains of low back pain radiating to the right leg with occasional numbness, neck pain radiating to the shoulders and bilateral knee pain. The pain was rated as a 6-7/10 with the use of medication and 10/10 without medication. The injured worker also reported improvement of activities of daily living. The injured worker was noted to report 50% improvement in the right knee with Euflexxa injections. Objective physical examination findings were notable for tenderness over the midline of the lower lumbar spine and tenderness over the medial and lateral joint lines of the right and left knee with bilateral crepitus. The physician noted that another request for left knee Euflexxa injections was made as the previous authorization had expired. On 01/07/2015, Utilization Review non-certified a request for Euflexxa Injections of the left knee, outpatient, noting that insufficient documentation was provided to support the need for the injections. ACOEM and ODG guidelines were cited.

IMR ISSUES, DECISIONS AND RATIONALES

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

Euflexxa injection (Hyaluronic Acid Injection) for the Left Knee: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines; Work Loss Data Institute, LLC: Corpus Christi, TX: www.odg.-twc.com; Section: Knee & Leg (Acute & Chronic) (updated 06/05/2014)ACOEM-<https://www.acoempracguides.org/Knee>: Table 2. Summary of Recommendations, Knee Disorders

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Knee & Leg (Acute & Chronic)

Decision rationale: The MTUS and ACOEM did not specifically address the use of hyaluronic acid injections and therefore other guidelines were consulted. Per the ODG, hyaluronic acid injections are recommended as a possible option for severe osteoarthritis for patients who have not responded adequately to recommended conservative treatments (exercise, NSAIDs or acetaminophen), to potentially delay total knee replacement, but in recent quality studies the magnitude of improvement appears modest at best. While osteoarthritis of the knee is a recommended indication, there is insufficient evidence for other conditions, including patellofemoral arthritis, chondromalacia patellae, osteochondritis dissecans, or patellofemoral syndrome (patellar knee pain). Hyaluronic acids are naturally occurring substances in the body's connective tissues that cushion and lubricate the joints. Intra-articular injection of hyaluronic acid can decrease symptoms of osteoarthritis of the knee; there are significant improvements in pain and functional outcomes with few adverse events. A review of the injured workers medical records show that she not responded adequately to other conservative treatments and will benefit from hyaluronic acid injections, therefore based on her specific clinical presentation and the guidelines the request for Euflexxa injection (Hyaluronic Acid Injection) for the Left Knee is medically necessary.