

<b>Case Number:</b>	CM15-0010095		
<b>Date Assigned:</b>	01/27/2015	<b>Date of Injury:</b>	07/11/2006
<b>Decision Date:</b>	03/19/2015	<b>UR Denial Date:</b>	12/29/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/19/2015

### 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: Texas, New York, 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 injured worker is a 61 year old male, who sustained an industrial injury on 7/11/2006. The diagnoses have included left knee medial meniscal tear and osteoarthritis right knee. Treatment to date has included physical therapy, steroid injection and pain medications. The injured worker underwent left knee arthroscopy on 6/16/2014; the postoperative diagnosis was degenerative medial meniscal tear with lateral meniscal tear and medial plica. A progress report from 10/20/2014 notes that the injured worker complained of pain, swelling and tightness in the left knee. According to the Primary Treating Physician's Progress Report from 11/10/2014, the injured worker presented for a left knee cortisone injection. Objective findings revealed minimal effusion. An undated Primary Treating Physician's Progress Report documented that the injured worker had only a couple days improvement after the steroid injection. He was noted to be overall improved compared to pre-operatively, but still had occasional pain with activity. Authorization was requested for Euflexxa injections of the left knee. On 12/29/2014, Utilization Review (UR) non-certified a request for Left Knee Euflexxa Injections times three, noting that these injections are indicated for significant degenerative osteoarthritis. The ACOEM Guidelines were cited.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Left Knee Euflexxa Injections X 3: Overturned**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Knee Chapter, Hyaluronic section.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM V.3 > Knee > Specific Diagnoses > Knee Pain and Osteoarthritis > Injections Viscosupplementation Injections Viscosupplementation has been used for knee osteoarthritis (15, 1253, 1279-1296) and to treat pain after arthroscopy and meniscectomy. (1297) Similar to glucocorticosteroid injections, the purpose is to gain sufficient relief to either resume conservative medical management or to delay operative intervention. (1280, 1287, 1298-1301) Recommendation: Intra-articular Knee Viscosupplementation Injections for Moderate to Severe Knee Osteoarthritis Intra-articular knee viscosupplementation injections are recommended for treatment of moderate to severe knee osteoarthritis. Indications Knee pain from osteoarthritis that is unsatisfactorily controlled with NSAID(s), acetaminophen, weight loss, or exercise strategies.

**Decision rationale:** Yes, the proposed knee Euflexxa (visco supplementation) injections are medically necessary, medically appropriate, and indicated here. The MTUS does not address the topic. However, the Third Edition ACOEM Guidelines Knee Chapter does acknowledge that visco supplementation injections are indicated in the treatment of moderate-to-severe knee arthritis, particularly in applicants who wish to defer a total knee arthroplasty procedure. ACOEM also notes that visco supplementation injections are indicated to treat post-meniscectomy knee pain. Here, the applicant did undergo an unsuccessful knee meniscectomy surgery. The applicant has operative evidence of knee arthritis. The applicant has failed other treatments, including physical therapy, corticosteroid injection therapy, etc. Moving forward with the proposed visco supplementation (Euflexxa) injections was/is indicated. Therefore, the request is medically necessary.