

Case Number:	CM15-0017616		
Date Assigned:	02/05/2015	Date of Injury:	04/20/2004
Decision Date:	03/30/2015	UR Denial Date:	01/15/2015
Priority:	Standard	Application Received:	01/29/2015

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: California, Arizona
 Certification(s)/Specialty: Physical Medicine & Rehabilitation

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 54-year-old female who reported injury on 04/20/2004. The injured worker was noted to have series of 3 Synvisc injections on 07/28/2011, 04/25/2012, 11/29/2012 and 09/05/2013. There was a Request for Authorization submitted for review dated 01/05/2015. The documentation of 12/30/2014 was of poor quality and difficult to read. However, the documentation indicated the injured worker had bilateral leg pain with numbness and bilateral knee pain. Documentation indicated the injured worker underwent 10 sessions of Synvisc injections. The documentation indicated the injured worker was last seen on 04/07/2014 for a series of injections. The injured worker was noted to have constant knee pain. Physical examination of the left knee revealed moderate plus medial para patellar focal tenderness; there was mild to moderate bilateral patellar facet tenderness. The apprehension test was negative, as was the Lachman test. The injured worker had trace 1+ medial laxity in -30 degrees of extension. There was mild to moderate lateral joint line tenderness. The McMurray's was negative. The x-ray of the left knee revealed some medial compartment arthritis and minimal patella femoral arthritis. The x-ray of the right knee revealed medial compartment arthritis and minimal patella femoral arthritis. Physical examination of the right knee revealed the injured worker had a patella compression test that was minimally positive. The injured worker had mild plus medial patellar facet tenderness. There was mild lateral patellar facet tenderness. The injured worker had moderate plus medial joint line tenderness and very mild lateral joint line tenderness. Diagnoses included primary osteoarthritis of the left knee and right knee. The treatment plan included a Series of 3 Synvisc injections for both knees.

IMR ISSUES, DECISIONS AND RATIONALES

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

Series of 3 Synvisc injections for both knees: Upheld

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 acid injections

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee & Leg Chapter, Hyaluronic Acid Injection.

Decision rationale: The Official Disability Guidelines indicate that repeat hyaluronic acid injections are recommended if there is documented significant improvement in symptoms for 6 months or more; the clinical documentation submitted for review indicated the injured worker had prior injections. However, the objective functional benefit that received was not provided. There was a lack of documentation indicating the injured worker had a significant improvement in symptoms for 6 months or more. Given the above, the request for series of 3 Synvisc injections for both knees is not medically necessary.