

<b>Case Number:</b>	CM15-0113968		
<b>Date Assigned:</b>	06/22/2015	<b>Date of Injury:</b>	03/01/2013
<b>Decision Date:</b>	07/22/2015	<b>UR Denial Date:</b>	05/07/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/12/2015

### 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 applicant is a represented 59-year-old [REDACTED] beneficiary who has filed a claim for knee and leg pain reportedly associated with an industrial injury of March 1, 2013. In a Utilization Review report dated May 12, 2015, the claims administrator failed to approve a request for knee MRI imaging. The claims administrator referenced a RFA form received on April 13, 2015 in its determination. The applicant's attorney subsequently appealed. On April 13, 2015, the applicant reported heightened complaints of knee pain and discomfort a year and half removed from earlier knee arthroscopy. The applicant was apparently working, it was suggested. 120 degrees of knee range of motion was noted with medial joint line tenderness and a positive McMurray maneuver. A knee corticosteroid injection was performed. The attending provider stated that he wished to obtain a knee MRI for the purposes of determining whether the applicant's degenerative joint disease had progressed and/or whether the applicant had any new meniscal tear present. The attending provider stated that the applicant had also received previously a viscosupplementation injection. The attending provider also stated that the applicant would ultimately become a candidate for total knee replacement. The attending provider did not explicitly state how he thought the proposed knee MRI would influence the immediate treatment plan.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**MRI (magnetic resonance imaging) Right Knee: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 341-343. Decision based on Non-MTUS Citation Official Disability Guidelines: Knee chapter - MRI (magnetic resonance imaging).

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 335.

**Decision rationale:** No, the request for a knee MRI was not medically necessary, medically appropriate, or indicated here. While the MTUS Guideline in ACOEM Chapter 13, Table 13-2, page 335 does acknowledge that MRI imaging can be employed to confirm a diagnosis of meniscus tear, ACOEM qualifies its position by noting that such testing is indicated only if surgery is being contemplated. Here, however, there was no mention of the applicant's actively considering or contemplating further knee surgery on or around the date in question, April 23, 2015. On that date, the attending provider seemingly stated that he was ordering knee MRI imaging for academic or evaluation purposes, to determine the extent of progression of arthritic changes involving the knee. It did not appear that the applicant was intent on pursuing any kind of surgical remedy as of the date of the request. There was, thus, neither an explicit statement (nor an implicit expectation) that the applicant would act on the results of the knee MRI in question. Therefore, the request was not medically necessary.