

Case Number:	CM15-0127272		
Date Assigned:	07/13/2015	Date of Injury:	08/02/2013
Decision Date:	08/11/2015	UR Denial Date:	06/05/2015
Priority:	Standard	Application Received:	07/01/2015

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

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Pain Management

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 73 year old male, who sustained an industrial injury on 8/02/2013. He reported walking and his left knee gave out. The injured worker was initially diagnosed as having left knee sprain and lumbar sprain. He was currently diagnosed as having left knee industrial aggravation of medial compartment arthritis, status post left complete meniscectomy in 1970, and industrial aggravation of lumbar degenerative disc disease and joint disease. Treatment to date has included diagnostics, physical therapy, chiropractic, corticosteroid injections, and medications. On 11/21/2014, it was documented that the injured worker received a Synvisc injection two days prior and it was really starting to help. X-ray of the left knee was documented as normal. Magnetic resonance imaging was documented to show medial meniscus absent from a prior surgery and some chondromalacia. A Qualified Medical Evaluation (dated 11/08/2014) noted periodic Synvisc injection helped initially, but continued pain after 6-7 months. It was documented that he had a Synvisc injection on 3/21/2014. Currently (5/22/2015), the injured worker complains of left knee Synvisc injection starting to wear off. He also requested chiropractic visits for his low back. A physical exam only noted range of motion measurements and did not specify the body part measured. Left knee viscosupplementation was administered with no immediate complications noted.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retro Left knee Synvisc injection, 6cc-48mg: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Knee & Leg - 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 and Leg Chapter, Hyaluronic acid injections.

Decision rationale: Regarding the request for repeat viscosupplementation, neither the CA MTUS nor the ACOEM Practice Guidelines provide guidelines regarding the use of hyaluronic acid injections. The ODG state the following regarding repeat hyaluronic acid injections: "Repeat series of injections: If documented significant improvement in symptoms for 6 months or more, and symptoms recur, may be reasonable to do another series. No maximum established by high quality scientific evidence." Within the documentation available for review, there is documentation of prior viscosupplementation. A progress note from November 2014 contains information that the patient received viscosupplementation about 3 months ago and it helped. Note that the ODG does not require a degree of function improvement to be documented, but rather the criteria for repeat viscosupplementation is that there is significant improvement in symptoms for 6 months or more. Although there is documentation that the knee x-ray done early for this patient was 'normal,' the worker had left knee MRI which showed chondromalacia. This is degeneration of the knee cartilage and is the same process as arthritis of the knee cartilage. Given this, this retrospective request is medically appropriate.