

Case Number:	CM15-0175011		
Date Assigned:	09/17/2015	Date of Injury:	09/17/2013
Decision Date:	10/20/2015	UR Denial Date:	08/21/2015
Priority:	Standard	Application Received:	09/04/2015

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, South Carolina

Certification(s)/Specialty: Preventive Medicine, Occupational Medicine, Family Practice

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 41-year-old male who sustained an industrial injury on September 17, 2013. Diagnoses have included right knee arthrofibrosis with extension deficit, medial and lateral meniscal tears, arthritis with synovitis, and on August 14, 2015 diagnosis of derangement of meniscus not elsewhere classified - "new problem." Documented treatment includes: right knee ACL reconstruction in January of 2014, multi-compartment synovectomy, meniscectomy and chondroplasty on April 23, 2015; knee brace; and post-operative physical therapy. Number of visits anticipated in the April 30, 2015 progress reported to be 12, but number completed and his response were not present in the provided documentation. During visit of August 14, 2015, the physician reported that the injured worker "still cannot not fully extend the knee," and he stated there was pain and soreness with extension or standing for extended periods of time. The physician noted that there was no bruising or swelling. The treating physician's plan of care includes Orthovisc right knee injections once a week for four weeks, but this was denied on August 21, 2015. The injured worker has returned to work.

IMR ISSUES, DECISIONS AND RATIONALES

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

Orthovisc injection, once weekly to the right knee, QTY: 4.00: 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 and Leg, Hyaluronic Acid Injections.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG Knee & Leg (Acute & Chronic), Hyaluronic acid injections ODG Knee & Leg (Acute & Chronic), Orthovisc (hyaluronan).

Decision rationale: The CA MTUS guidelines are silent concerning the use of viscosupplements (Orthovisc); however, the ODG recommends Orthovisc as a possible option for severe osteoarthritis (OA) in injured workers who have not responded adequately to recommended conservative treatments (e.g. exercise, NSAIDs or acetaminophen) after three months, and to potentially delay total knee replacement. Severe osteoarthritis must be documented with pain in those over age 50 that interferes with activities of daily living and have failed intra-articular steroids. Furthermore, viscosupplementation is not recommended for any other indications such as chondromalacia patellae, facet joint arthropathy, osteochondritis dissecans, patellofemoral arthritis, and patellofemoral syndrome. AHRQ Comparative Effectiveness Research reported that in osteoarthritis of the knee, any clinical improvement attributable to viscosupplementation was likely small and not clinically relevant. According to recent treating physicians' progress reports for this injured worker, severe OA is not documented for this injured worker under the age of 50. Therefore, the request for Orthovisc injection, once weekly to the right knee #4, is not medically necessary and appropriate.