

Case Number:	CM15-0177785		
Date Assigned:	09/18/2015	Date of Injury:	03/10/2009
Decision Date:	11/12/2015	UR Denial Date:	09/01/2015
Priority:	Standard	Application Received:	09/09/2015

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: New Jersey

Certification(s)/Specialty: 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 30-year-old male, who sustained an industrial injury on 03-10-2009. He has reported injury to the bilateral knees. The diagnoses have included history of left quadriceps tendon rupture and repair; and chronic right patella tendon rupture. Treatment to date has included medications, diagnostics, bracing, and surgical intervention. A progress report from the treating provider, dated 08-05-2015, documented an evaluation with the injured worker. The injured worker reported that he remains symptomatic; he indicates at this point that he does wish to proceed with surgical intervention for his chronic right patella tendon rupture; he utilizes a knee immobilizer for stabilization with ambulation; however, this immobilizer is no longer functional, as it is quite old and worn, and the Velcro is no longer working; and he utilizes a T-long brace for the left knee following his quadriceps tendon repair, and this brace is worn and no longer functioning as well. Objective findings included there is a complete rupture of the patella tendon on exam of the right knee; range of motion is full and the patella is high-riding; there is a well-healed surgical incision anteriorly on exam of the left knee; and range of motion is from 0- 70 degrees. The provider noted that the injured worker requires the knee braces for ambulation. The treatment plan has included the request for left knee T-long brace, right knee. The original utilization review, dated 09-01-2015, non-certified the request for left knee T-long brace, right knee.

IMR ISSUES, DECISIONS AND RATIONALES

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

Left knee T-Long brace, right knee: Upheld

Claims Administrator guideline: Decision based on MTUS Knee Complaints 2004. Decision based on Non-MTUS Citation Official Disability Guidelines Online Edition 2015 Chapter: Knee & Leg (Acute & Chronic) Knee brace.

MAXIMUS guideline: Decision based on MTUS Knee Complaints 2004, Section(s): Activity Alteration, Summary.

Decision rationale: The MTUS ACOEM Guidelines state that knee braces may be used for patellar instability, anterior cruciate ligament tears, or medical collateral ligament instability, although its benefits may be more emotional than medical. Usually the knee brace is only necessary in these cases if the patient is going to be stressing the knee under load, but for the average patient prophylactic knee bracing is not recommended and unnecessary. In all cases, if a brace is used, it must be fitted properly and combined with a rehabilitation program. It appears that from the notes if this request was for a replacement of the existing left knee brace, which was used regularly. If this assessment is correct, then there was insufficient evidence presented to suggest this worker at this point needed after surgery of the left knee. In addition, there was no recent documentation of this worker doing any physical therapy, including home exercises. Therefore, the need for a knee brace replacement cannot be justified as requested.