MAXIMUS Federal Services

Case Number:	CM15-0070202		
Date Assigned:	04/17/2015	Date of Injury:	03/10/2012
Decision Date:	05/19/2015	UR Denial Date:	04/01/2015
Priority:	Standard	Application Received:	04/13/2015

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 64 year old female who sustained an industrial injury on 3/10/12. The mechanism of injury is unclear. She currently complains of achiness, stiffness, pain and swelling with prolonged weight bearing activity. Her last Synvisc injection was 8/26/14 and its positive effects are wearing off. Medications are not indicated. Diagnoses include status post left knee diagnostic and operative arthroscopy (9/7/12); grade II osteoarthritis of the left patella, trochlear, grade III of medial femoral condyle, grade II to III of medial tibial plateau, grade III lateral tibial plateau. Treatments to date include Synvisc injections with excellent results. Diagnostics are not available. In the progress note dated 3/24/15, the treating provider's plan of care requests Synvisc injection due to excellent results achieved from previous injections regarding pain relief.

IMR ISSUES, DECISIONS AND RATIONALES

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

Synvisc one injection - Left knee: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG).

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

Decision rationale: Regarding the request for repeat Synvisc one injection Left knee, California MTUS does not address the issue. ODG supports hyaluronic acid injections for patients with significantly symptomatic osteoarthritis who have not responded adequately to nonpharmacologic (e.g., exercise) and pharmacologic treatments or are intolerant of these therapies, with documented severe osteoarthritis of the knee, pain that interferes with functional activities (e.g., ambulation, prolonged standing) and not attributed to other forms of joint disease, and who have failed to adequately respond to aspiration and injection of intra-articular steroids. Guidelines go on to state that the injections are generally performed without fluoroscopic or ultrasound guidance. ODG states that if there is significant improvement in symptoms for 6 months or more, and symptoms recur, it may be reasonable to do another series. Within the documentation available for review, there is documentation of a previous hyaluronic acid injection. However, there is no documentation of significant improvement in symptoms and objective functional improvement for 6 months or more after the previous injections. Additionally, there is no documentation of failure of conservative management including aspiration and injection of intra-articular steroids. In the absence of such documentation, the currently requested repeat Synvisc one injection Left knee is not medically necessary.