

Case Number:	CM15-0071569		
Date Assigned:	04/21/2015	Date of Injury:	08/22/2007
Decision Date:	05/20/2015	UR Denial Date:	04/08/2015
Priority:	Standard	Application Received:	04/15/2015

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: Maryland

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

This 49 year old female sustained an industrial injury to the left knee on 8/22/07. Previous treatment included magnetic resonance imaging, left knee arthroscopic repair, physical therapy, injections and medications. In an orthopedic evaluation dated 3/23/15, the injured worker complained of left knee pain. Physical exam was remarkable for left knee with diffuse tenderness to palpation, laxity of the medial collateral ligaments secondary to degenerative changes and positive patellar crepitus. The injured worker was morbidly obese. Current diagnoses included pain in lower leg joint and chondromalacia of patella. The physician noted at it was unlikely that additional arthroscopic surgery would be of any lasting benefit. The treatment plan included 1 Custom- Molded VQ BioniCare OActive Brace and Viscosupplementation if the injured worker was still having pain following use of the brace.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 Custom- Molded VQ BioniCare OActive Brace: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints. Decision based on Non-MTUS Citation In. Harris J (Ed) Occupational Medicine Practice Guidelines, 2nd Edition (2004) pp. 339-340; Official Disability Guidelines (ODG), Treatment Index, 11th Edition (web) 2013, Knee and Leg Chapter.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 340. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee- Bionicare; 1/2 knee device.

Decision rationale: 1 Custom- Molded VQ Bionicare OActive Brace is not medically necessary per the MTUS ACOEM Guidelines and the ODG. The MTUS states that a knee brace is recommended as an option for patients in a therapeutic exercise program for osteoarthritis of the knee, who may be candidates for total knee arthroplasty (TKA) but want to defer surgery. The ACOEM does state that a knee brace can be used for patellar instability, anterior cruciate ligament (ACL) tear, or medial collateral ligament (MCL) instability although its benefits may be more emotional. The ACOEM does state that a brace is necessary only if the patient is going to be stressing the knee under load, such as climbing ladders or carrying boxes. Per the ODG the Bionicare is recommended as an option for patients in a therapeutic exercise program for osteoarthritis of the knee, who may be candidates for total knee arthroplasty (TKA) but want to defer surgery. The documentation indicates that the patient is not a TKA candidate. The documentation does not indicate that she is stressing a knee under load such as climbing ladders or carrying boxes. The documentation does not indicate that the patient is participating in a therapeutic exercise program. Therefore the request for a Bionicare knee brace is not medically necessary.