

Case Number:	CM15-0077558		
Date Assigned:	04/29/2015	Date of Injury:	03/19/2003
Decision Date:	05/28/2015	UR Denial Date:	04/18/2015
Priority:	Standard	Application Received:	04/23/2015

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: Texas, New York, California
 Certification(s)/Specialty: Preventive Medicine, Occupational 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:

The applicant is a represented [REDACTED] beneficiary who has filed a claim for chronic knee pain reportedly associated with an industrial injury of March 19, 2003. In a Utilization Review report dated April 18, 2015, the claims administrator failed to approve a request for viscosupplementation (Synvisc) injections while approving a knee x-ray. The applicant was 68 years old, it was reported. A March 30, 2015 progress note was referenced in the determination. The applicant's attorney subsequently appealed. On March 30, 2015, the applicant reported ongoing complaints of knee pain status post earlier knee arthroscopy. The applicant had had nine months of pain relief with earlier viscosupplementation injections. The applicant reported difficulty walking on uneven terrain. The applicant reported intermittent locking about her knee. The applicant had undergone earlier arthroscopic knee surgery in 2003. The applicant's BMI was 23. The applicant exhibited moderate medial compartmental joint space narrowing on knee x-rays, the treating provider noted. Osteophyte formation was noted in multiple compartments. Severe arthritis of the patellofemoral joint was reported. Viscosupplementation injections were proposed. The applicant had already retired, it was acknowledged.

IMR ISSUES, DECISIONS AND RATIONALES

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

3 synvisc injections to the left knee: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Knee & Leg (Acute & Chronic).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Occupational Medicine Practice Guidelines, 3rd ed., Knee Disorders 687 VISCOSUPPLEMENTATION INJECTIONS.

Decision rationale: Yes, the proposed Synvisc (viscosupplementation) injections were medically necessary, medically appropriate, and indicated here. The MTUS does not address the topic. However, the Third Edition ACOEM Guidelines Knee Chapter notes that intra-articular viscosupplementation injections are recommended for moderate-to-severe knee osteoarthritis. Here, the applicant had clinically evident, radiographically confirmed knee osteoarthritis. Earlier viscosupplementation injections had attenuated the applicant's pain complaints and apparently deferred the need for surgical intervention involving the injured knee. Moving forward with repeat viscosupplementation injections, thus, was indicated. Therefore, the request is medically necessary.