

Case Number:	CM14-0155953		
Date Assigned:	10/07/2014	Date of Injury:	12/08/2008
Decision Date:	11/07/2014	UR Denial Date:	08/27/2014
Priority:	Standard	Application Received:	09/23/2014

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. The expert reviewer is Board Certified in Physical Medicine and Rehabilitation and is licensed to practice in California. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

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 57-year-old female who reported an injury on 12/08/2008. The mechanism of injury was due to a slip and fall. The diagnoses included osteoarthritis, chondromalacia of the medial femoral condyle, left. The previous treatments included Orthovisc injections, surgery and MRI. Within the clinical note dated 08/28/2014, it was reported the injured worker complained of pain in the lower back and left shoulder. On the physical examination, the provider noted the injured worker had internal derangement of the bilateral knees. The request submitted is for Orthovisc injections of the bilateral knee. However, a rationale was not submitted for clinical review. The Request for Authorization form was submitted and dated on 09/29/2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Orthovisc injections, 1 time a week for 4 weeks, bilateral knee: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG (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 Official Disability Guidelines (ODG) Knee and Leg, Hyaluronic acid injections.

Decision rationale: The request for Orthovisc injections, 1 time a week for 4 weeks, bilateral knee is not medically necessary. Official Disability Guidelines recommend hyaluronic acid injections also known as Orthovisc injections as a possible option for severe arthritis for patients who have not responded adequately to recommend conservative treatments, exercise, NSAIDs or acetaminophen, to potentially delay total knee replacement, but in recent quality studies the magnitude of improvement appears modest at best. Patients experience significantly symptomatic osteoarthritis but have not responded adequately to recommended conservative nonpharmacologic or pharmacologic treatments or are intolerant to other therapies including gastrointestinal problems related to anti-inflammatory medications after at least 3 months; documented symptomatic severe osteoarthritis of the knee, which may include the following: bony enlargement, bony tenderness, crepitus on active motion, less than 30 minutes of morning stiffness, no palpable warmth of synovium, and over the age of 50. The guidelines note pain interferes with functional activities, ambulation, prolonged sitting, prolonged standing and not attributed to other forms of joint disease; failure to adequately respond to aspiration and injection of intra-articular steroids. Hyaluronic acid injections are not recommended for any other indications such as chondromalacia patella, facet joint arthropathy, osteochondritis, patellofemoral arthritis, patellofemoral syndrome, plantar nerve entrapment syndrome, or for the use of joints other than the knee, because of the effectiveness of hyaluronic acid injections for these indications have not been established. The clinical documentation submitted failed to document a physical examination demonstrating the injured worker to have enlargement, bony tenderness, crepitus on active motion or less than 30 minutes of morning stiffness or no palpable warmth of synovium. There is lack of clinical documentation indicating the injured worker's previous course of Orthovisc injections and the efficacy of the injections. Therefore, the request is not medically necessary.