

Case Number:	CM13-0044895		
Date Assigned:	12/27/2013	Date of Injury:	01/14/2010
Decision Date:	03/06/2014	UR Denial Date:	10/24/2013
Priority:	Standard	Application Received:	10/29/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Physical Medicine & Rehabilitation and is licensed to practice in Illinois, Indiana and Texas. 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 physician 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 patient is a 44-year-old female who reported an injury on 01/14/2010. The mechanism of injury was stated to be the patient was pushing milk crates to the back and, when the milk crates stopped, the patient did not. It was indicated the patient tried to stop herself from falling by grabbing the door and fell to the floor and had bilateral knee pain. The patient was noted to have a positive McMurray's and have pain consistently with palpation. The patient was noted to have a trace effusion. The patient was noted to have bilateral patellofemoral symptoms with stiffness and pain, especially with prolonged sitting. The patient was positive for crepitus bilaterally. The patient's diagnoses were noted to include chondromalacia of the patella bilaterally, and bilateral degenerative joint disease, left more than right, as well as osteoarthritis unspecified whether generalized or local, and internal derangement of the knees. The request was made for a gym membership with a pool for 6 months, and a Tru-pull Lite Knee Brace.

IMR ISSUES, DECISIONS AND RATIONALES

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

A six month gym membership with a pool: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

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

Decision rationale: Official Disability Guidelines indicate that gym memberships and swimming pools would not generally be considered medical treatment and therefore are not covered under these guidelines. There was a lack of documentation of exceptional factors to warrant nonadherence to guideline recommendations. Given the above, the request for 6 month gym membership with pool is not medically necessary.

A Tru-pull Lite Knee Brace: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 340.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 346.

Decision rationale: ACOEM Guidelines indicate that a knee brace can be used for patellar instability, for an anterior cruciate ligament tear, or medial collateral ligament instability, although its benefit may be more emotional than medical. Additionally, it indicates that a brace is necessary if the patient is going to be stressing the knee and their load such as climbing ladders or carrying boxes. The patient was noted to be working full time and was noted to be complaining of knee pain due to standing on concrete while working and of difficulty with ambulation and feeling like her knee was going to give out. The patient was noted to have symptoms of knee arthritis or a meniscus injury and was noted to have a positive McMurray's test. The clinical documentation indicated that the patient had a knee brace that was too small and a new one was ordered. There was a lack of clarity as to whether the patient then received a brace that was the correct size and if the submitted request was for the first brace that was ordered, that came in too small or for a 2nd brace. There is a lack of documentation of work that would be stressing the patient's knee. Given the above, and the lack of clarity, the request for a knee brace is not medically necessary.