

Case Number:	CM13-0063908		
Date Assigned:	12/30/2013	Date of Injury:	02/04/2008
Decision Date:	05/12/2014	UR Denial Date:	11/18/2013
Priority:	Standard	Application Received:	12/10/2013

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, has a subspecialty in Pain Management 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:

This is a patient with a date of injury of 2/4/08. A utilization review determination dated 11/18/13 recommends non-certification of an exercise cycle and resistance chair purchase. 10/24/13 medical report identifies left knee pain and weakness. On exam, there is tenderness over the medial and lateral joint line, 4/5 strength flexion/extension, positive SLR, and some positive SI joint provocative tests. The requests are intended to increase ROM, function, and ADLs.

IMR ISSUES, DECISIONS AND RATIONALES

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

SMOOTH RIDER II EXERCISE CYCLE PURCHASE: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines-Treatment for Workers' Compensation, Online Edition, Chapter: Knee and Leg, Durable Medical Equipment

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Exercise Page(s): 46-47.

Decision rationale: Regarding the request for a Smooth Rider II Exercise Cycle purchase, CA MTUS does support the use of exercise and an independent home exercise program in the long-term management of industrial injuries. However, home exercise programs are typically

designed without the need for any specialized equipment. Within the medical information available for review, there is no clear rationale identifying the medical necessity of specialized equipment to address the patient's functional deficits rather than active participation in a standard independent home exercise program. In light of the above issues, the currently requested Smooth Rider II Exercise Cycle purchase is not medically necessary.

FOLDING RESISTANCE CHAIR PURCHASE: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines-Treatment for Workers' Compensation, Online Edition, Chapter: Knee and Leg, Durable Medical Equipment.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Exercise Page(s): 46-47.

Decision rationale: Regarding the request for a Folding Resistance Chair purchase, CA MTUS does support the use of exercise and an independent home exercise program in the long-term management of industrial injuries. However, home exercise programs are typically designed without the need for any specialized equipment. Within the medical information available for review, there is no clear rationale identifying the medical necessity of specialized equipment to address the patient's functional deficits rather than active participation in a standard independent home exercise program. In light of the above issues, the currently requested Folding Resistance Chair purchase is not medically necessary.