

Case Number:	CM14-0007282		
Date Assigned:	02/19/2014	Date of Injury:	04/24/1977
Decision Date:	04/03/2015	UR Denial Date:	12/20/2013
Priority:	Standard	Application Received:	01/20/2014

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. 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: California

Certification(s)/Specialty: Physical Medicine & Rehabilitation

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 70 year old female, who sustained an industrial injury on 4/24/1977. The diagnoses have included chondromalacia of patella, osteoarthritis bilateral knees, and effusion of lower leg (bilateral knees). Treatment to date has included injections, medication and physical therapy. Currently, the IW is being evaluated for follow up on her knee. Objective findings included improvement in her strength level and range of motion. Swelling is going down. On 12/20/2013, Utilization Review non-certified a request for a stationary bike noting that exercise equipment is not considered medical in nature per the guidelines. The ODG was cited. On 1/20/2014, the injured worker submitted an application for IMR for review of stationary bike.

IMR ISSUES, DECISIONS AND RATIONALES

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

STATIONARY BIKE: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITY GUIDELINES (ODG), KNEE & LEG, DURABLE MEDICAL EQUIPMENT.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official disability guidelines knee and leg (acute and chronic) chapter, exercise equipment; DME.

Decision rationale: The patient was injured on 04/24/1977 and presents with lower back spasms/burning to the right thigh and less radiating pain to the left buttocks to lateral foot. The request is for a STATIONARY BIKE. The RFA is dated 12/10/2013 and the patient is retired. The report with the request is not provided nor is there any discussion regarding this request. Stationary bike is considered exercise equipment. ODG Guidelines under the knee and leg (acute and chronic) chapter, section exercise equipment states that "exercise equipment is considered not primarily medical in nature." ODG Guidelines then refers to the durable medical equipment section under the knee and leg chapter which requires that the equipment must have a primary medical purpose. ODG Guidelines also does not consider one exercise superior to another. ODG Guidelines states that the term DME is defined as equipment which: 1. Can withstand repeated use, i.e., not normally be rented, and used by successive patients. 2. Is primarily and customarily used to serve a medical purpose. 3. Generally is not useful to a person in the absence of illness or injury. 4. Is appropriate for use in a patient's home. While a stationary bike is a good way for the patient to exercise, it is not superior to other methods of exercise that can be accomplished without a stationary bike. There is no discussion as to why the patient is unable to establish a home exercise program to manage her pain. Therefore, the requested stationary bike is not medically necessary.