MAXIMUS Federal Services

Case Number:	CM14-0191264		
Date Assigned:	11/25/2014	Date of Injury:	06/28/2013
Decision Date:	01/13/2015	UR Denial Date:	10/16/2014
Priority:	Standard	Application Received:	11/17/2014

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 Family Medicine 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 56 year old female with date of injury of 06/28/13. The claimant works as a secretary and slipped on plastic floor covering and landed on her left knee. Prior treatment consisted of rest and physical therapy. She most recently had an injection Euflexxa. This request is for gym membership with pool to continue weight loss and aquatic exercise for 3 months, and a dietary consult dated 1010/14. Per the doctor's office note dated 05/20/14, the claimant's presumed diagnosis is arthritis left knee and obesity. She has a BMI of 55.97. This request was non certified on 10/16/14. The CA MTUS ACOEM does not address the request for gym membership with pool to continue weight loss and aquatic exercise for three months. There is no documentation indicating whether a home exercise program has been used in the past to assist with weight loss. The ODG Knee and leg, gym memberships state in part: not recommended as a medical prescription unless a home exercise program has not been effective and is a need for equipment. The ODG aquatic therapy states: recommended as an optional form of exercise therapy where available, as an alternative to land based physical therapy. It is specifically recommended where reduced weight bearing is desirable, for example extreme obesity. The CA MTUS does not address the request for a consult with a dietician. ACOEM states Consultation: A consultation is intended to aid in assessing the diagnosis, prognosis, therapeutic management, determination of medical stability, and permanent residual loss and/or examinee's fitness for return to work. A consultant is usually requested to act in an advisory capacity, but may sometimes take full responsibility for investigating and/or treating a patient within the doctor-patient relationship.

IMR ISSUES, DECISIONS AND RATIONALES

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

Gym membership with pool x 3 months: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Knee and Leg, Gym Memberships

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, Aquatic Therapy, Gym Membership,

Decision rationale: The ODG does not recommend gym memberships unless a documented home exercise program with periodic assessment and revision has not been effective and there is a need for equipment. In addition, treatment needs to be monitored and administered by medical professionals. However, there is no evidence that attempts at home exercise were ineffective. There is no evidence that the patient would require specialized equipment. There is also no indication that treatment will be administered and monitored by medical professionals. In addition, gym memberships, health clubs, swimming pools, athletic clubs, etc., are not generally considered medical treatment. Therefore, the request for Gym membership is not medically necessary.

Consultation with dietician: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) Independent Medical Review and consults, introduction, page 127

Decision rationale: Weight reduction program is considered medically necessary for patients who have failed to lose at least one pound per week after at least 6 months on a weight loss regimen that includes a low calorie diet, increased physical activity, and behavioral therapy and who have either a (BMI) greater than or equal to 30 kg/m or a BMI greater than or equal to 27 kg/m with obesity-related risk factors such as HTN, DM, CVD, OSA, or hyperlipidemia. There is no documentation of prior failure to lose weight or clarification of current BMI or risk factors. The request is not reasonable for consultation with dietician and therefore considered as not medically necessary.