

Case Number:	CM15-0087713		
Date Assigned:	05/11/2015	Date of Injury:	10/20/2013
Decision Date:	06/11/2015	UR Denial Date:	04/27/2015
Priority:	Standard	Application Received:	05/07/2015

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: Maryland

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Neuromuscular Medicine

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 25 year old female, who sustained an industrial injury on October 20, 2013 while working inventory control for a loss prevention company. The injury occurred while the injured worker was performing her usual and customary duties. The injured worker has been treated for right knee complaints. The diagnoses have included right anterior cruciate ligament tear, sleep disturbance and depressive disorder, not otherwise specified with anxiety. Treatment to date has included medications, radiological studies, psychological testing, physical therapy and right knee surgery. Current documentation dated April 6, 2015 notes that the injured worker reported sensitivity on the lateral aspect of the scar and anterolateral aspect of the right knee. The injured worker also reported difficulty with climbing stairs, bending, stooping, squatting and kneeling. Examination of the right knee revealed tenderness to palpation over the medial and lateral joint lines and patella. Also noted was hyperesthesia of the scar and crepitus of the knee. Range of motion was decreased and a patellar grind test was noted to be positive. Muscle weakness was noted to be a 4/5 upon flexion and extension. The treating physician's plan of care included a request for a one year gym membership.

IMR ISSUES, DECISIONS AND RATIONALES

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

One year gym membership: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Low Back - Lumbar & Thoracic (Acute & Chronic), 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) Low back-gym memberships.

Decision rationale: One year gym membership is not medically necessary per the ODG Guidelines. The MTUS does not specifically address gym memberships. The ODG does not recommend gym membership as a medical prescription unless a documented home exercise program with periodic assessment and revision has not been effective and there is a need for equipment. Plus, treatment needs to be monitored and administered by medical professionals. With unsupervised programs there is no information flow back to the provider, so he or she can make changes in the prescription, and there may be risk of further injury to the patient. Gym memberships, health clubs, swimming pools, athletic clubs, etc., would not generally be considered medical treatment, and are therefore not covered under these guidelines. The documentation submitted does not reveal that periodic assessment and revision of a documented home exercise program has not been effective. The request for a one year gym membership is not medically necessary.