

Case Number:	CM14-0176356		
Date Assigned:	10/29/2014	Date of Injury:	06/28/1996
Decision Date:	12/10/2014	UR Denial Date:	09/25/2014
Priority:	Standard	Application Received:	10/24/2014

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 Occupational 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 applicant is a represented [REDACTED] employee who has filed a claim for chronic knee pain reportedly associated with an industrial injury of June 28, 1996. The applicant has been treated with the following: Analgesic medications; bilateral total knee arthroplasty procedure; unspecified amounts of physical therapy over the course of the claim; and the apparent imposition of permanent work restrictions through a Medical-legal Evaluation of July 15, 2008. In a Utilization Review Report dated September 18, 2014, the claims administrator denied a request for a gym membership. The applicant's attorney subsequently appealed. In a March 18, 2014 progress note, the applicant reported ongoing complaints of knee pain. The applicant was overweight with a BMI of 35. The applicant was given Celebrex for persistent pain about the indwelling knee prosthesis. It was stated that the applicant was not a candidate for further surgery. The attending provider stated that the applicant was still quite active and quite functional despite his pain complaints. In a September 16, 2014 progress note, the applicant reported ongoing complaints of knee pain. The applicant apparently had a skin rash generated by usage of a knee brace. The applicant's BMI was again 35, it was stated. It was stated that the applicant would like to do independent strengthening exercises with a gym membership. A three-month gym membership was therefore sought. In an August 7, 2014 progress note, the applicant reported ongoing complaints of knee and back pain, reportedly attributed to a 1996 fall injury. The applicant was reportedly using Norco for pain relief, it was suggested on this occasion. The applicant did exhibit an antalgic gait but was able to stand on his toes and heels without difficulty. 5/5 lower extremity strength was exhibited. In another section of the note, it was stated that the applicant's gait was normal. Authorization was sought for a new knee brace on the grounds that the applicant's current knee braces were wearing out.

IMR ISSUES, DECISIONS AND RATIONALES

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

Gym Membership for three 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 (ODG)

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 83, Chronic Pain Treatment Guidelines Physical Medicine topic. Page(s): 98.

Decision rationale: As noted in the California Medical Treatment Utilization Schedule (MTUS)-adopted American College of Occupational and Environmental Medicine (ACOEM) Guideline in Chapter 5, page 83, to achieve functional recovery, applicants must assume certain responsibilities, one of which included adhering to and maintaining exercise regimen. The gym membership at issue, thus, per ACOEM, is an article of applicant responsibility as opposed to an article of payer responsibility. It is further noted that the attending provider has not outlined any compelling applicant-specific factors which would offset the unfavorable ACOEM position the article at issue. The applicant, for instance, was described on August 7, 2014 as staying active, playing golf, walking, and working on losing weight. Similarly, on a March 18, 2014 progress note, the applicant was also described as quite active and quite functional. As further noted on page 98 of the MTUS Chronic Pain Medical Treatment Guidelines, applicants are expected to continue active therapies at home as an extension of the treatment process in order to maintain improvement level. Here, all evidence on file points to the applicant's being able to continue self-directed home physical medicine independently through walking, playing golf, etc., as he is currently doing, effectively obviating the need for the proposed gym membership. Therefore, the request is not medically necessary.