

Case Number:	CM13-0005643		
Date Assigned:	07/20/2013	Date of Injury:	01/14/2008
Decision Date:	01/03/2014	UR Denial Date:	07/01/2013
Priority:	Standard	Application Received:	08/01/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Internal Medicine & Pulmonary Disease, 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 physician 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.

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 patient is a 36-year-old female with a reported date of injury of 04/14/2009. The patient reportedly was carrying a metal pan, slipped on a wet floor and fell onto her buttocks, causing her knees to bend towards her back. The patient reportedly sustained injuries to her knee and low back. The patient has been treated with pain medications as well as medications for depression and has attended a HELP program. An MRI of the lumbar spine was reportedly performed on 11/02/2012, which revealed degenerative changes most pronounced at L5-S1, where there was a diffuse disc bulge with a superimposed central disc protrusion which contacted the transiting nerve roots bilaterally. The most recent evaluation submitted by [REDACTED] dated 07/29/2013 revealed that the patient reported Celebrex did not effectively relieve her pain but she was obtaining pain relief with tramadol. Medications included tramadol 50 mg, Celebrex 10 mg, diazepam 5 mg at bedtime, omeprazole 20 mg 2 to 3 times per day and Prozac 20 mg and 60 mg at bedtime as well as Duragesic patches. It was recommended that the patient continue with the treating physicians and continue working with the pain management doctor. According to the most recent evaluation by [REDACTED] on 08/12/2013, it was reported that the patient looked more depressed than she had in the recent past. The patient's Prozac was increased from 60 mg to 80 mg at night, and Valium was changed to Klonopin 1 mg twice a day. Examination revealed that mood was more depressed and anxious.

IMR ISSUES, DECISIONS AND RATIONALES

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

6 month YMCA 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 (ODG), Knee & Leg (Acute & Chronic), and Thoracic & Lumbar (Acute & Chronic) Chapters.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Per the Strength of Evidence hierarchy established by the California Department of Industrial Relations, Division of Workers' Compensation, the Expert Reviewer based his/her decision on Official Disability Guidelines (ODG), Low Back Chapter, Gym Memberships, which

Decision rationale: The California MTUS does not address the requested gym membership. The Official Disability Guidelines state that gym memberships are not recommended 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. The clinical information submitted for review did not address whether the employee was utilizing a home exercise program that had not been effective, and there was a need for equipment to meet guideline criteria for the requested gym membership. There was a lack of rationale provided to support the requested 6 month YMCA membership as a recent and thorough physical examination was not provided. The request for a six month YMCA membership is not medically necessary and appropriate.