

Case Number:	CM13-0017653		
Date Assigned:	12/11/2013	Date of Injury:	09/01/2011
Decision Date:	02/12/2014	UR Denial Date:	08/13/2013
Priority:	Standard	Application Received:	08/28/2013

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 Physical Medicine & Rehabilitation, has a subspecialty in Pain Management, 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. 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:

This is a female patient with a date of injury of September 1, 2011. A utilization review determination dated August 13, 2013 recommends noncertification of lumbar exercise kit with Theraball. A progress report dated July 29, 2013 indicates that the patient was carrying a box weighing approximately 60 pounds when she felt a sharp pain in her low back. The note indicates she was given physical therapy and released back to work with restrictions. The patient currently complains of intermittent pain in her low back traveling into both legs rated as 6/10 on the numeric rating scale. The patient also experiences numbness and tingling in the legs and indicates that she has been using a TENS unit and a lumbar support which have been helpful. Physical examination identifies normal neurologic examination of the lower extremities and tenderness to palpation around the lumbar spine and sacroiliac joint. Diagnoses include displacement of lumbar intervertebral disc, low back pain, lumbar facet joint syndrome, myalgia, and annular tear at L5 S1. Treatment recommendations include lumbar epidural steroid injection, lumbar facet joint blocks, clearance from an internal medicine specialist, blood tests, cold unit, and a lumbar exercise kit with Theraball.

IMR ISSUES, DECISIONS AND RATIONALES

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

Lumbar exercise kit with theraball: 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 & Leg.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Cornerstones of Disability Prevention and Management (ACEOM Practice Guidelines, 2nd Edition (2004), Chapter 5) page 77, and the Official Disability Guidelines, Chronic Pain Chapter, section on Exercise.

Decision rationale: The ACOEM Guidelines support the use of aerobic activity to avoid deconditioning. The Official Disability Guidelines state that exercise is recommended. They go on to state that there is no evidence to support recommendation for any particular exercise regimen over any other exercise regimen. Guidelines support the use of independent exercise programs for the treatment of painful conditions. Within the documentation available for review, there is no indication that the patient has been unsuccessful in utilizing a home exercise program in the absence of any special equipment. Additionally, there is no statement indicating that the patient has been trained in the appropriate use of exercise equipment, to reduce the risk of further injury. In the absence of such documentation, the current request for a lumbar exercise kit with theraball is not medically necessary and appropriate.