

Case Number:	CM13-0025403		
Date Assigned:	11/20/2013	Date of Injury:	04/12/2004
Decision Date:	02/12/2014	UR Denial Date:	09/12/2013
Priority:	Standard	Application Received:	09/18/2013

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 Family Practice, 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:

The patient is a 55-year-old injured worker who reported an injury on April 12, 2004. The mechanism of injury was noted to be a slip and fall. The patient diagnoses included post-laminectomy syndrome of the lumbar spine, myofascial pain syndrome, and chronic pain syndrome. The June 26, 2013 office note, states that the patient needs a gym membership as the patient has had 9 sessions of aquatic therapy and needs to continue aquatic therapy.

IMR ISSUES, DECISIONS AND RATIONALES

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

Gym membership: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG)

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: The Official Disability Guidelines state that gym memberships are not recommended as a medical prescription. This is stated to be due to the fact that treatment needs to be monitored and administered by medical professionals. It further states that while an individual exercise program is highly recommended, more elaborate personal care where

outcomes are not monitored by a health professional is not supported. Therefore, as gym memberships are not considered medical treatment, the request cannot be supported. The request for a gym membership is not medically necessary and appropriate.