MAXIMUS Federal Services

Case Number:	CM13-0043099		
Date Assigned:	12/27/2013	Date of Injury:	03/10/2010
Decision Date:	02/27/2014	UR Denial Date:	10/02/2013
Priority:	Standard	Application Received:	10/30/2013

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 Pain Management has a subspecialty in disability management and is licensed to practice in California, DC, Maryland and Florida. 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 female with a date of injury 3/11/2010. There is a prospective request for one year yoga membership. At the office visit on 9/5/13 she complained of lower back pain and neck pain. On examination she had no significant limitations in the lumbar or cervical spine. Previous treatment has included pain medication and 6 months of yoga therapy. In the most recent medical report dated 10/24/2014, the patient is a retired [redacted] police officer who is noted to have complaints of back and leg pain with radiation to both arms and legs, which has significantly resolved. She continues to have complaints of stiffness and soreness on a daily basis and this is related to spondylotic or degenerative changes both the neck and the low back. She has seen her greatest improvement with yoga therapy and she was authorized for this for one year previously, she is requesting authorization for subsequent yoga therapy and a one-year membership at this time, which has not been approved yet. Her symptoms are significant enough that she takes Norco for it on a regular basis and we will renew her prescription. She is continuing to exercise on a daily basis and is involved in exercise from walking to even riding camels

IMR ISSUES, DECISIONS AND RATIONALES

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

1. Yoga Membership: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Yoga Page(s): 126.

Decision rationale: This patient was approved for six months to participate in Yoga therapy, and this is long enough for the patient to practice home based program based on the lesions learned. In regard to yoga, it is recommended as an option for only highly motivated patients. Since this patient was already approved for 6 months of yoga therapy and there is no specialized equipment only found in the gym needed for yoga practice, it seems a year yoga membership is not necessary. Treatment (work related activity) must be specific to the worker's needs, and the worker's work tasks. Activity must resemble work tasks. Specificity of training is desirable to maximize carry over to work tasks or home based activities. In many cases activity can be prescribed so that it can be performed in the workers usual settings (i.e. work or home), without the need to introduce an alternate setting (i.e. the gym). This also supports early progression towards self management, rather than developing reliance on equipment/outside services that is not available at work or home, and/or on the medical clinics. The additional costs of gym membership and treatment provider travel could not be considered reasonably necessary if treatment using work related activity can be effectively provided in the clinic, home, or work environment. Therefore, the request for a gym/fitness membership for Yoga therapy is not medically necessary