

<b>Case Number:</b>	CM14-0011082		
<b>Date Assigned:</b>	02/21/2014	<b>Date of Injury:</b>	02/12/2009
<b>Decision Date:</b>	06/25/2014	<b>UR Denial Date:</b>	01/22/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/28/2014

### 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 has filed a claim for chronic low back pain reportedly associated with an industrial injury of February 12, 2009. Thus far, the applicant has been treated with the following: analgesic medications; attorney representation; earlier lumbar fusion surgery; and unspecified amounts of physical therapy over the life of the claim. In a Utilization Review Report dated January 21, 2014, the claims administrator denied a request for a gym membership. It was stated that the applicant was not working and appeared to be on Social Security Disability Insurance. It was stated that the applicant had already had six months of an aquatic gym membership through that point in time. The applicant's attorney subsequently appealed. It appears that the gym membership in question was requested through a request for authorization (RFA) form dated November 1, 2013, without attachment of an associated progress note. A physical therapy discharge note of December 10, 2013 was notable for comments that the applicant was currently working out in the pool four times weekly. The applicant had not been working since March 2010, it was stated. The applicant was a former auto mechanic, it was further noted. The applicant's gait was not described. The applicant was asked to continue exercise therapy, including further aquatic therapy. A medical progress note of December 13, 2013 was sparse and notable for comments that the applicant had had a recent sleep study which was negative for obstructive sleep apnea. The applicant had out of control diabetes, it was stated. The applicant had issues with a family conflict. The applicant was finally approved for Social Security Disability Insurance, it was stated. The applicant had three different attorneys, it was further noted. The applicant was on Metformin and Norco, it was further stated. In a December 13, 2013 urology note, the applicant was given Viagra and Flomax for erectile dysfunction and urinary retention. The applicant was given Viibryd on December 12, 2013 for depression.

## **IMR ISSUES, DECISIONS AND RATIONALES**

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

### **TWELVE (12) MONTH AQUATIC GYM MEMBERSHIP: Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines AQUATIC THERAPY,. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Gym membership.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 80,Chronic Pain Treatment Guidelines Aquatic therapy Page(s): 22.

**Decision rationale:** As noted in the MTUS Chronic Pain Medical Treatment Guidelines, aquatic therapy is reserved as an optional form of exercise therapy in applicants in whom reduced weight bearing is desirable. In this case; however, the applicant's gait and ambulatory status were not detailed or described on any recent medical or physical therapy progress note. It was not clearly stated or suggested why or if reduced weight bearing was desirable here. It is further noted that the MTUS/ACOEM guidelines notes that to achieve functional recovery, applicants must assume certain responsibilities, one of which is to adhere to and maintain exercise regimens. Thus, the gym membership being sought by the attending provider has been deemed, per ACOEM, to be a matter of applicant responsibility as opposed to a matter of payer responsibility. Therefore, the request is not medically necessary.