

Case Number:	CM14-0011810		
Date Assigned:	02/21/2014	Date of Injury:	10/11/2012
Decision Date:	07/21/2014	UR Denial Date:	01/19/2014
Priority:	Standard	Application Received:	01/29/2014

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 patient is a 40-year-old male with a 10/11/12 date of injury. Progress report dated 1/7/14 revealed improving low back pain rated a 2-3 on a scale of 10, only in the morning and evening, with left leg radiculitis. He has increased activities of daily living and is able to bend, walk and stoop. He also complained of mild intermittent cervical spine pain with flare ups rated 0/10 with medications, and 3/10 without. He is able to dress himself and perform his home exercise program. Objectively, there was mild pain with palpation over the left sacroiliac joint and lumbosacral regions. Othopedic testing was unable to re-create the patient's radicular symptoms, although testing for likely sacroiliac joint pathology was positive bilaterally. His range of motion had improved since his last visits with mild pain in all planes. The patient had been diagnosed with cervical and thoracolumbar musculoligamentous sprain/strain with left leg radiculitis, and positive MRI findings dated 1/31/13 to include a 7mm left L5-S1 disc herniation, degenerative disc disease, stenosis L4-5 with 3mm disc protrusion. The patient has been participating in a home exercise program and also using a TENS unit which have been helpful, along with taking Vicodin 500mg two times per day. The patient's work status is temporary totally disabled until 6 weeks, thereafter being able to return to work with no lifting over 20lbs, no repetitive bending/stooping, no forceful pushing/pulling, and no prolonged sitting and driving. There is documentation of a previous 1/19/14 adverse determination because there was no evidence of a failed home exercise program, nor a need for specialized equipment found in a gym, such as a swimming pool.

IMR ISSUES, DECISIONS AND RATIONALES

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

6 MONTH GYM MEMBERSHIP WITH POOL ACCESS: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG (Low Back Chapter, Gym Membership).

Decision rationale: The Official Disability Guidelines (ODG) does not recommend gym memberships unless a documented home exercise program with periodic assessment and revision has not been effective and there is a need for equipment. In addition, treatment needs to be monitored and administered by medical professionals. However, in this case, there is no evidence that attempts at home exercise were ineffective. There is no evidence that the patient would require specialized equipment. There is also no indication that treatment will be administered and monitored by medical professionals. In addition, gym memberships, health clubs, swimming pools, athletic clubs, etc., are not generally considered medical treatment. Therefore, the request for 6 month gym membership with pool access is not medically necessary and appropriate.