

Case Number:	CM14-0166126		
Date Assigned:	10/13/2014	Date of Injury:	09/16/2013
Decision Date:	11/13/2014	UR Denial Date:	09/15/2014
Priority:	Standard	Application Received:	10/08/2014

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 Internal Medicine & Emergency Medicine and is licensed to practice in 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 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:

This patient is a 39 year-old with a date of injury of 09/16/13. A progress report associated with the request for services, dated 09/02/14, identified subjective complaints of neck and low back pain as well as headache. Objective findings included decreased range of motion of the cervical spine with paracervical trigger points. Motor function and reflexes were normal. Diagnoses (paraphrased) included cervical sprain/strain; traumatic brain injury; and myofascial pain syndrome. Treatment had included physical therapy, home exercise, non-steroidal anti-inflammatory drugs (NSAIDs) and transcutaneous electrical nerve stimulation (TENS). A Utilization Review determination was rendered on 09/16/14 recommending non-certification of "Gym Therapy (months) qty: 6.00 and Personal trainer sessions qty: 8.00".

IMR ISSUES, DECISIONS AND RATIONALES

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

Gym Therapy (months) QTY: 6.00: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines-Online

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 46-47. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain, Exercise; Low Back, Gym Memberships

Decision rationale: The Medical Utilization Treatment Schedule (MTUS) state that low-stress aerobic exercise is recommended with low back pain. The MTUS and the Official Disability Guidelines (ODG) state that exercise is recommended for all forms of pain. However, they note that there is insufficient evidence to recommend any particular exercise regimen over another. Further, they note that gym memberships and advanced home exercise equipment are not recommended as they lack monitoring and administration by a medical professional. Gym memberships and swimming pools are not considered medical treatment and therefore not covered under the Guidelines. Therefore, in this case, the record does not document the medical necessity for an exercise program that involves a gym membership.

Personal trainer sessions QTY: 8.00: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 46-47. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain, Exercise; Low Back, Gym Memberships

Decision rationale: The Medical Utilization Treatment Schedule (MTUS) state that low-stress aerobic exercise is recommended with low back pain. The MTUS and the Official Disability Guidelines (ODG) state that exercise is recommended for all forms of pain. However, they note that there is insufficient evidence to recommend any particular exercise regimen over another. Further, they note that gym memberships and advanced home exercise equipment are not recommended as they lack monitoring and administration by a medical professional. Gym memberships and swimming pools are not considered medical treatment and therefore not covered under the Guidelines. Therefore, in this case, the record does not document the medical necessity for an exercise program that involves a personal trainer.