MAXIMUS Federal Services

Case Number:	CM14-0167232		
Date Assigned:	10/14/2014	Date of Injury:	12/02/2010
Decision Date:	11/17/2014	UR Denial Date:	10/01/2014
Priority:	Standard	Application Received:	10/10/2014

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 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 injured worker is a 37 year-old woman who was working as a part-time esthetician. She sustained compensable cumulative trauma injury from repeat work. Treatment to date includes physical therapy, MRI's, EMG/NCS, bone scan, and, medications. On September 29, 2014 physician list of diagnoses include thoracic outlet syndrome, cervical strain, bilateral upper extremity-radiculopathy and neuropathy, chronic pain and left shoulder signs/symptoms. The physician notes that AT was helpful and reduced opioids. Pool therapy helped with shoulder rehab. There is significant range of motion restriction to the left shoulder and noted that a thoracic outlet vest has increased her stamina. The doctor noted that he would monitor her progress with the pool/gym membership. Initial physical therapy treatments were started December 4, 2013. The notes dated January 13, 2014 indicated that the injured worker is responding to treatment moderately well at this time. AROM of the left shoulder has improved 1-145 in elevation, abduction remains 0-105 with increased pain and n/t to the left upper extremity. Tolerance to low level land based stretching and mobility has been fair. Tolerance to aquatic-based exercise has been good. Recommendation is for progression of mobility and functional strength as tolerated. An additional 24 visits have been authorized for continued physical therapy. The injured worker was seen by the primary treating physician on September 9, 2014 for a follow-up on her upper back, neck, thoracic outlet injury with upper extremity radiation, numbness, loss of strength and shoulder injury. She is wearing her latest version of her thoracic outlet vest with better comfort, support and positioning with respect to the shoulders/thoracic outlet. She finds that it has helped improve her stamina. She does get achy, but it may be because she is pushing through some of the pain. Having significant improvement with it encourages her, although she still has problems driving, lifting, pushing, pulling, and holding things. She still gets cervico-occipital migraines when she is bad. Sitting, standing and walking is without

limitations. Massage has been significantly helpful. She is unsure how many sessions she has had. She notes that she can definitely do more as far as activities and gain more function and strength.

IMR ISSUES, DECISIONS AND RATIONALES

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

Gym/health club membership for 6 months: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Aquatic Therapy Page(s): 22. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG); Gym Memberships

Decision rationale: Pursuant to the Official Disability Guidelines, gym memberships are not medically necessary. Gym memberships are not recommended as a medical prescription unless a home exercise program has not been effective and there is a need for equipment. Additionally, treatment needs to be monitored and administered by a medical professional. While an individual exercise program is of course recommended, more elaborate personal care outcomes are not monitored by health professional such as gym memberships or advanced home exercise equipment. In this case, the injured worker has a combination of medical problems including shoulder restricted range of motion and chronic pain syndrome. The request for a gym membership is not recommended as being medically necessary. While participation in the gym program may improve the claimant's overall health and well-being and even a specific compensable condition, it does not constitute a clinical, professionally directed medical service. Health club memberships are considered recreational, not therapeutic. The activities are not explicitly prescribed and supervised by a licensed health professional, goals are not established and monitored, adherence is voluntary and compliance is not measurable. There is no way to supervisor these activities and there are no long-term studies showing these memberships are any more effective than participation in a self-directed home exercise program. An orthopedist's follow up note discusses the benefits of aquatic therapy. While aquatic therapy can minimize the effects of gravity, it is specifically recommended where reduced weight-bearing is desirable for example extreme obesity. The medical record did not discuss specific reduced weight-bearing issues nor did the treating physician mention extreme obesity as an active issue. The injured worker has had physical therapy and should be familiar with self-instruction and doing a concerted self-directed home exercise program. Based on the clinical information in the medical record and the peer-reviewed, evidence-based guidelines, a gym membership is not medically necessary.