

Case Number:	CM14-0040751		
Date Assigned:	06/27/2014	Date of Injury:	02/20/1990
Decision Date:	08/19/2014	UR Denial Date:	03/18/2014
Priority:	Standard	Application Received:	04/04/2014

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 Physical Medicine & Rehabilitation, has a subspecialty in Pain 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 78-year-old male with a 2/20/90 date of injury to the low back. A 12/27/13 progress note described right-sided greater than left sided lumbosacral pain that is made worse with prolonged sitting and driving. Pain radiates down into the right hip and buttock, as well as down to the thigh. Clinically, there was increased pain with range of motion and negative SLR. Treatment plan discussed continuing medications and a yearly gym program. The 2/25/14 progress note described increased low back pain with colder weather and when the patient performs physical activities. Pain does not normally last more than one day. Pain in the low back radiates into the bilateral legs. Ultracet was refilled. A year gym membership was requested. 2/25/14 x-rays and lumbar spine revealed lumbar spondylosis with facet disease at L4-5 and L5-S1. 2/25/14 progress note described increased low back pain with colder weather and when the patient performs physical activities. Pain does not normally last more than one day. Pain in the low back radiates into the bilateral legs. Ultracet was refilled. A year gym membership was requested. 2/25/14 x-rays and lumbar spine revealed lumbar spondylosis with facet disease at L4-5 and L5-S1.

IMR ISSUES, DECISIONS AND RATIONALES

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

GYM MEMBERSHIP X 12 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, KNEE AND LEG CHAPTER, ON LINE VERSION. GYM MEMBERSHIP.

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

Decision rationale: Medical necessity for the requested gym membership is not established. 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. Gym memberships, health clubs, swimming pools, athletic clubs, etc., would not generally be considered medical treatment. It is noted that the patient does not have constant pain in the low back. There is no discussion of participation in home exercise program, and it is unclear if the patient will be undergoing a gym membership program that will be supervised by a physician. In this case, it has not been established that there is a need for specialized equipment. It has not been documented that the patient has been taught appropriately or has been prescribed a specific set of exercises where this cannot be accomplished in an independent home setting. The request is not substantiated.