

Case Number:	CM14-0073291		
Date Assigned:	07/16/2014	Date of Injury:	02/07/2007
Decision Date:	09/16/2014	UR Denial Date:	04/24/2014
Priority:	Standard	Application Received:	05/20/2014

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 claimant injured her low back on 02/07/07. A one-year health club membership with a pool and a TENS unit purchase are under review. She has a diagnosis of degenerative lumbar disc disease with spondylosis and is status post arthrodesis. She had a displacement of the disc and spinal stenosis. She also had unspecified neuritis/radiculitis and a sacroiliac sprain with sacroiliitis. As of 04/15/14, she completed her last two PT sessions. She stated she wanted the hardware removed with the interbody fusion with a cage at L2-3. Her surgery occurred on 05/25/13. It was too early to remove the hardware. She had pain over that retained hardware. She wanted to have the pedicle screw hardware removed in June 2014. She was taking several medications. A rental of a TENS unit was recommended prior to a possible purchase. A health club membership with a pool was recommended in place of additional PT. She attended physical therapy and received electrical stimulation. This occurred in late 2013. She improved and felt better with therapy. She saw [REDACTED] on 04/15/14. A TENS unit rental had been approved but she had not received it yet and a one-year health club membership had been denied. A permanent TENS unit for use at home was recommended if the TENS rental was beneficial.

IMR ISSUES, DECISIONS AND RATIONALES

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

One year Health Club Membership with a pool: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines Chapter 5221.660, Health Clubs.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Aquatic therapy Page(s): 53. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG): Low Back, gym membership.

Decision rationale: The history and documentation support/do not objectively support the request for. The medical necessity of has not been clearly demonstrated. The MTUS do not address health clubs/gym memberships and the ODG state gym memberships are "not recommended as a medical prescription unless a documented home exercise program with periodic assessment and revision has not been effective and there is a need for equipment. Plus, treatment needs to be monitored and administered by medical professionals. While an individual exercise program is of course recommended, more elaborate personal care where outcomes are not monitored by a health professional, such as gym memberships or advanced home exercise equipment, may not be covered under this guideline, although temporary transitional exercise programs may be appropriate for patients who need more supervision. With unsupervised programs there is no information flow back to the provider, so he or she can make changes in the prescription, and there may be risk of further injury to the patient. Gym memberships, health clubs, swimming pools, athletic clubs, etc., would not generally be considered medical treatment, and are therefore not covered under these guidelines." In addition, the MTUS state regarding aquatic therapy "recommended as an optional form of exercise therapy, where available, as an alternative to land-based physical therapy. Aquatic therapy (including swimming) can minimize the effects of gravity, so it is specifically recommended where reduced weight bearing is desirable, for example extreme obesity."In this case, it is not clear why a one year health club membership is needed with aquatic therapy as there is no evidence that the claimant is unable to continue her rehab in a land-based home exercise program. Health club memberships are not typically monitored by health care professionals and therefore is not medically necessary and appropriate.

TENS unit -purchase: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines TENS (Transcutaneous Nerve Stimulation).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines TENS Page(s): 146.

Decision rationale: The history and documentation do not objectively support the request for purchase of a TENS unit at this time. The MTUS state on page 146 "TENS, chronic pain (transcutaneous electrical nerve stimulation) is not recommended as a primary treatment modality, but a one-month home-based TENS trial may be considered as a noninvasive conservative option, if used as an adjunct to a program of evidence-based functional restoration, for the conditions described below. While TENS may reflect the long-standing accepted standard of care within many medical communities, the results of studies are inconclusive; the published

trials do not provide information on the stimulation parameters which are most likely to provide optimum pain relief, nor do they answer questions about long-term effectiveness. (Carroll-Cochrane, 2001) Several published evidence-based assessments of transcutaneous electrical nerve stimulation (TENS) have found that evidence is lacking concerning effectiveness. One problem with current studies is that many only evaluated single-dose treatment, which may not reflect the use of this modality in a clinical setting. Other problems include statistical methodology, small sample size, influence of placebo effect, and difficulty comparing the different outcomes that were measured. Recommendations by types of pain: A home-based treatment trial of one month may be appropriate for neuropathic pain and CRPS II (conditions that have limited published evidence for the use of TENS as noted below), and for CRPS I (with basically no literature to support use). Neuropathic pain: Some evidence (Chong, 2003), including diabetic neuropathy (Spruce, 2002) and post-herpetic neuralgia. (Niv, 2005)." In this case, there is evidence that a TENS rental was approved and that if the rental was successful, a purchase would be recommended. However, there is no indication of a successful short term trial (typically about 30 days) of TENS rental in conjunction with continuation of home exercises. Therefore, the request is not medically necessary and appropriate.