

<b>Case Number:</b>	CM14-0081315		
<b>Date Assigned:</b>	07/18/2014	<b>Date of Injury:</b>	03/29/2012
<b>Decision Date:</b>	09/30/2014	<b>UR Denial Date:</b>	05/16/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/02/2014

### 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 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:

This is a 41-year-old female with a date of injury of 3/29/12. The mechanism of injury occurred when she lifted an unknown object and strained her back. In 12/13 a request for a gym membership was denied. On 4/22/14, she complained of frequent moderate lower back pain, which is located mainly on the right side of her lower back associated with stiffness and muscle spasms, which radiates to the right shoulder blade region. Occasionally it radiates to her buttocks. On exam the lumbar spine showed restricted range of motion. On palpation of the lower back reveals minimal tenderness over the surgical scar or the spinous process. There was very mild tenderness in the paraspinal muscles. There is mild tenderness at the right and left sacroiliac joint. There is no tenderness over either of the sciatic nerves. The diagnostic impression is obesity, lumbar strain, disc herniation with right lower extremity radiculopathy, s/p right L5-S1 laminectomy and discectomy, and persistent lower back pain. Treatment to date: surgery, physical therapy, medication management. A UR decision dated 5/16/14 denied the request for 1 year health club membership with pool for lumbar spine. The health club membership with pool was denied because there is no indication as to what will be done during a gym membership. There is no medically knowledgeable person supervising the program. Compliance is completely voluntary and unrecorded. Certain types of gym activities may actually be harmful for the diagnosis. There is nothing inherent in a gym membership that causes it to be superior to a frequently performed well-designed home exercise program.

### IMR ISSUES, DECISIONS AND RATIONALES

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

## **1 Year health club membership with pool for lumbar spine: Upheld**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines - Low Back Chapter - Lumbar & Thoracic (acute & chronic).

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

**Decision rationale:** 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, 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. However, there is no documentation that a home exercise program with periodic assessment and revision has been ineffective or attempted and that there is a need for special equipment. A specific rationale identifying why a gym membership with a pool would be required in this patient despite lack of guideline support was not identified. Indications for reduced weight bearing were not established. Therefore, the request for a 1 year health club membership with pool for lumbar spine is not medically necessary.