

Case Number:	CM15-0143261		
Date Assigned:	08/04/2015	Date of Injury:	04/01/2008
Decision Date:	09/24/2015	UR Denial Date:	07/17/2015
Priority:	Standard	Application Received:	07/23/2015

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:
State(s) of Licensure: California, Indiana, New York
Certification(s)/Specialty: Internal Medicine

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 36-year-old male, who sustained an industrial injury on 4-1-2008. The mechanism of injury occurred from carrying chairs. The injured worker was diagnosed as having lumbosacral radiculopathy, myofascial pain syndrome and lumbosacral disc protrusion. There is no record of a recent diagnostic study. Treatment to date has included lumbar laminotomy, trigger point injections, therapy and medication management. In a progress note dated 6-1-2015, the injured worker complains of upper and lower back pain with numbness in bilateral lower extremities. Pain at the worse was rated 9 out of 10 and with the help of medications was rated 2-3 out of 10. Physical examination showed restricted lumbar and thoracic range of motion with multiple myofascial trigger points. The treating physician is requesting a gym membership with a pool for 3 months.

IMR ISSUES, DECISIONS AND RATIONALES

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

Gym membership with pool for 3 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, Low Back.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain section, Gym membership.

Decision rationale: Pursuant to the Official Disability Guidelines, gym membership with pool for three months is not medically necessary. Gym memberships are not recommended as a medical prescription unless a documented home exercise program periodic assessment, revision has not been effective, and there is a need for equipment. Plus, treatment needs to be monitored and administered by medical professionals area 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 this case, the injured worker's working diagnoses are lumbosacral radiculopathy; chronic myofascial pain syndrome, thoracolumbar spine; and 10 mm disc protrusion at L5-S1 level. Date of injury is April 1, 2008. Request for authorization is July 10, 2015. According to the most recent progress note dated June 1, 2015, the injured worker subjectively complained of intractable upper and lower back pain with pain and numbness in the bilateral lower extremities. Trigger point injections have been helpful. Medications reduce pain to 2-3/10. Gym memberships, health clubs, swimming pools, athletic clubs, etc., would not generally be considered medical treatment and are therefore not covered under these guidelines. Based on clinical information in the medical record, peer-reviewed evidence-based guidelines and guidelines non-recommendations for gym memberships, gym membership with pool for three months is not medically necessary.