

Case Number:	CM15-0059698		
Date Assigned:	04/06/2015	Date of Injury:	07/16/1996
Decision Date:	05/05/2015	UR Denial Date:	03/02/2015
Priority:	Standard	Application Received:	03/30/2015

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 80 year old male, who sustained an industrial injury on 07/16/1996. He has reported injury to the low back. The diagnoses have included degeneration of lumbosacral intervertebral disc; and lumbar post-laminectomy syndrome. Treatment to date has included medications, diagnostic studies, aquatic exercise class, physical therapy, and surgical intervention. Medications have included Vicodin, Robaxin, Celebrex, and Lidoderm patches. A progress note from the treating provider, dated 02/24/2015, documented a follow-up visit with the injured worker. Currently, the injured worker complains of low back pain with radiation of pain to the left lower extremity; right lower extremity weakness, numbness, and tingling; stiffness and spasms of the low back; and goes to the gym and swims and walks in the water on a daily basis which significantly helps him. Objective findings have included an antalgic gait favoring the right; standing balance is moderately unsteady; and ambulates with a straight cane. The treatment plan has included the request for 1 year gym membership.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 year gym membership: 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) - gym memberships, ODG, Low Back - 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) Pain Section, Gym Membership.

Decision rationale: Pursuant to the Official Disability Guidelines, one year gym membership is not medically necessary. Gym memberships are not recommended as a medical prescription unless a documented home exercise program 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 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 is working diagnoses are degeneration of lumbosacral intervertebral disc; and lumbar post laminectomy syndrome. The documentation indicates the injured worker is engaged in a home exercise program and attends the gym. Gym memberships, health clubs, swimming pools would not generally be considered medical treatment and are therefore not covered under these guidelines. Consequently, absent guideline recommendations,one year gym membership is not medically necessary.