

Case Number:	CM14-0216170		
Date Assigned:	01/06/2015	Date of Injury:	06/20/2011
Decision Date:	03/03/2015	UR Denial Date:	12/05/2014
Priority:	Standard	Application Received:	12/24/2014

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. 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: Texas, Ohio, California

Certification(s)/Specialty: Preventive Medicine, Occupational 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 applicant is a represented [REDACTED] employee who has filed a claim for chronic low back pain reportedly associated with an industrial injury of June 20, 2011. In a Utilization Review Report dated December 5, 2014, the claims administrator denied a request for gym membership and vocational rehabilitation. The claims administrator referenced a November 18, 2014 progress note in its determination. The claims administrator suggested that the applicant was off of work as of the date of the request. The claims administrator seemingly suggested that the applicant was, per the November 18, 2014 progress note at issue, potentially a candidate for further lumbar spine surgery. The applicant's attorney subsequently appealed. In a medical-legal evaluation dated October 20, 2014, the medical-legal evaluator noted that the applicant was status post lumbar spine surgery on June 24, 2014. Both the medical-legal evaluator and the applicant were skeptical that the applicant would ever return to his former work as a plumber. The applicant was presently off of work, on total temporary disability, it was acknowledged. The applicant was on Celebrex, Norco and Soma, it was stated. The medical-legal evaluator suggested that the applicant remain off of work. A full rehabilitation program for another two months was recommended. On October 2, 2014, the applicant was again described as off of work, on total temporary disability. The applicant was on Norco and Soma for pain relief. The remainder of the file was surveyed. The most recent note on file was in fact an October 28, 2014 note. It did not appear that the more recent November 18, 2014, progress note in which the claims administrator predicated its decision upon was incorporated into the Independent Medical Review packet.

IMR ISSUES, DECISIONS AND RATIONALES

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

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 83,Chronic Pain Treatment Guidelines.

Decision rationale: No, the request for a gym membership was not medically necessary, medically appropriate, or indicated here. As noted on page 98 of the MTUS Chronic Pain Medical Treatment Guidelines, applicants are expected to continue active therapies at home as an extension of the treatment process. By implication, page 98 of the MTUS Chronic Pain Medical Treatment Guidelines does not support provision of a gym membership as it seemingly espouses the position that exercise regimens are an article of applicant responsibility. Similarly, the MTUS Guideline in ACOEM Chapter 5, page 83 also notes that to achieve functional recovery, applicants must assume certain responsibilities, one of which includes adhering to and maintaining exercise regimens. The gym membership at issue, thus, per both page 98 of the MTUS Chronic Pain Medical Treatment Guidelines and page 83 of the ACOEM Practice Guidelines, is an article of applicant responsibility. The attending provider did not, furthermore, outline a compelling case for specified equipment and/or establish that the applicant would be unable to perform home exercises without the gym membership at issue, although it is acknowledged that the November 18, 2014 progress note on which the article in question was sought was not incorporated into the Independent Medical Review packet. Therefore, the request was not medically necessary.

Vocational rehabilitation: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Chronic Pain Programs Page(s): 31-32.

Decision rationale: Similarly, the request for a vocational rehabilitation program of unspecified duration was likewise not medically necessary, medically appropriate, or indicated here. While page 31 of the MTUS Chronic Pain Medical Treatment Guidelines does acknowledge that vocational rehabilitation is an important component in and can represent a type of chronic pain program or functional restoration program, this recommendation is, however, qualified by commentary on page 32 of the MTUS Chronic Pain Medical Treatment Guidelines to the effect that one of the cardinal criteria for pursuit of a chronic pain program/functional restoration program/vocational rehabilitation is evidence that the applicant is not an candidate for surgery or other treatments, which would clearly be warranted to improve function. Here, the claims

administrator has contended that a November 18, 2014 progress note which it was afforded access to suggested that the applicant was, in fact, actively considering further lumbar spine surgery, effectively obviating the need for the proposed vocational rehabilitation as of the date of the request. While it is acknowledged that said November 18, 2014 progress note was not incorporated into the Independent Medical Review packet, the information, which was/is on file, however, failed to make a compelling case for the request. Therefore, the request was not medically necessary.