

Case Number:	CM15-0010783		
Date Assigned:	01/28/2015	Date of Injury:	10/31/2012
Decision Date:	03/20/2015	UR Denial Date:	01/13/2015
Priority:	Standard	Application Received:	01/20/2015

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: Maryland, Texas, Virginia

Certification(s)/Specialty: Internal Medicine, Allergy and Immunology, Rheumatology

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 40 year old male who sustained an industrial injury on 10/31/2012. He complains of low back pain and spasm. Diagnoses include herniated nucleus pulposus, right L5, S1, with radiculopathy. Treatment to date has included medications, core strengthening regime, acupuncture, and stretching exercises. A physician progress note 12/19/2014 documents the injured workers' pain is throbbing and shooting across his right lower back, and stiffness. Range of motion is limited with full extension. There is moderate tenderness and spasm along the lumbar and thoracic paraspinal musculature. Straight leg raise is negative. His regime includes exercise followed by submerging in hot water and a muscle relaxant. Treatment requested is for an Intex pure spa inflatable hot tub. On 01/13/2015 Utilization Review non-certified the request for an Intex pure spa inflatable hot tub, and cited was California Medical Treatment Utilization-Chronic Pain, and Official Disability Guidelines.

IMR ISSUES, DECISIONS AND RATIONALES

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

Intex pure spa inflatable hot tub: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Knee and Leg

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Physical Therapy, Physical Medicine Page(s): 98-99. Decision based on Non-MTUS Citation Low Back - Lumbar & Thoracic (Acute & Chronic), Physical Therapy; Knee, Durable Medical Equipment (DME) and Exercise Equipment Medicare.gov, durable medical equipment

Decision rationale: The MTUS is silent on Intex pure spa inflatable hot tub as a durable medical equipment used for home exercise programs. California MTUS guidelines refer to physical medicine guidelines for physical therapy and recommends as follows: "Allow for fading of treatment frequency (from up to 3 visits per week to 1 or less), plus active self-directed home Physical Medicine." Additionally, ACOEM guidelines advise against passive modalities by a therapist unless exercises are to be carried out at home by patient. This would be the case with hot tub as it would involve passive therapy which is not recommended by the MTUS. MTUS and ACOEM are silent regarding the medical necessity of Intex pure spa inflatable hot tub. ODG does state regarding durable medical equipment (DME), "Recommended generally if there is a medical need and if the device or system meets Medicare's definition of durable medical equipment (DME) below" and further details "Exercise equipment is considered not primarily medical in nature." Medicare details DME as: -durable and can withstand repeated use-used for a medical reason-not usually useful to someone who isn't sick or injured-appropriate to be used in your home Intex pure spa inflatable hot tub does not meet the criteria for durability and home use per Medicare classification. As such, the request for Intex pure spa inflatable hot tub is not medically necessary.