

<b>Case Number:</b>	CM15-0111019		
<b>Date Assigned:</b>	06/17/2015	<b>Date of Injury:</b>	10/13/2011
<b>Decision Date:</b>	07/16/2015	<b>UR Denial Date:</b>	05/22/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/09/2015

### 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 28 year old female, who sustained an industrial injury on 10/13/11. She reported low back pain radiation to the left leg. The injured worker was diagnosed as having lumbosacral radiculopathy status post discectomy and foraminotomy and chronic low back pain. Treatment to date has included a L4, L5 and S1 transforaminal epidural steroid injection, left L4-5 laminotomy, left L4-5 discectomy and foraminotomy with decompression of the L4 and L5 nerve roots, and physical therapy. Currently, the injured worker complains of low back pain that radiates to the right lower extremity and feet with numbness to the right thigh and 5th toe. The treating physician requested authorization for an outpatient [REDACTED] or gym membership to aid in losing weight and help improve the low back symptoms.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Outpatient [REDACTED] or gym membership to aid in losing weight and help improve the low back symptoms:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation [www.aetna.com/cpb/medical/data/1\\_99/0039.html](http://www.aetna.com/cpb/medical/data/1_99/0039.html).

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://emedicine.medscape.com/article/123702-treatment>.

**Decision rationale:** Pursuant to Medline plus (see attached link), outpatient [REDACTED] or gym membership to aid in losing weight and help improve low back symptoms is not medically necessary. Treatment of obesity starts with comprehensive lifestyle management (i.e. diet, physical activity, behavioral modification) which should include the following: self-monitoring of caloric intake and physical activity; goal setting; stimulus control; nonfood rewards; and relapse prevention. See attached link for details. 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's working diagnoses are lumbosacral radiculopathy status post discectomy and foraminotomy; and chronic low back pain. The date of injury is October 13, 2011. A progress note dated April 23, 2015 states the injured worker has ongoing low back pain. The injured worker is status post laminectomy and discectomy in 2012. The injured worker's height is 5'5", weight 240 pounds and BMI 39.9. There is no documentation the medical record the injured worker has attempted weight control, dietary measures and ongoing exercises with comprehensive lifestyle management changes. Additionally, gym memberships are not considered medical treatment and are not covered under the official disability guidelines. Consequently, absent clinical documentation with attempted weight loss and lifestyle management changes and guideline non-recommendations for gym memberships, outpatient [REDACTED] or gym membership to aid in losing weight and help improve low back symptoms is not medically necessary.