

Case Number:	CM15-0128176		
Date Assigned:	07/14/2015	Date of Injury:	01/27/1988
Decision Date:	08/11/2015	UR Denial Date:	06/09/2015
Priority:	Standard	Application Received:	07/02/2015

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

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:

This 67 year old male sustained an industrial injury to the neck and back on 1/27/88. Previous treatment included magnetic resonance imaging, cervical fusion, physical therapy, chiropractic therapy, trigger point injections, cervical traction, transcutaneous electrical nerve stimulator unit, massage, cognitive behavioral therapy, psychotherapy, exercise and medications. In a consultation dated 5/28/15, the injured worker complained of pain 7/10 on the visual analog scale. Physical exam was remarkable for cervical spine with muscle spasms in the trapezius, levator scapula, rhomboids and deltoids bilaterally with decreased cervical spine range of motion and lumbar spine with tenderness to palpation, decreased range of motion, shortening of the hamstrings. The injured worker's sensation was intact. The injured worker was able to heel and toe walk. Past medical history was significant for hypertension, heart disease, dizziness, anxiety, depression, panic attacks, arthritis, stomach problems and alcohol abuse. Current diagnoses included cervicgia status post fusion surgery, lumbar spine degenerative disc disease and myofascial pain syndrome. The physician noted that it appeared that the injured worker used his medications appropriately and emphasized activity as an adjunct. The treatment plan included continuing current medications (Atorvastatin, Trazodone, Lisinopril, Paroxetine, Finasteride, Fluticasone, Sildenafil, Norco, Baclofen, Lidocaine patch and Prilosec) and a gym membership with access to a pool so that the injured worker could independently performed previously learned exercises.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 gym membership for 6 months with access to therapeutic pool: 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 - 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) Low Back Chapter/Gym Membership Section.

Decision rationale: The MTUS Guidelines do not address gym memberships to provide access for self directed therapy. The ODG does not recommend gym membership as a medical prescription unless a documented home exercise program with periodic assessment and revision has not been effective and there is a need for equipment. Treatment needs to be monitored and administered by medical professionals to monitor outcomes. With unsupervised programs there is no information flow back to the provider, so changes in the prescription can be made, 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. Therefore, the request for 1 gym membership for 6 months with access to therapeutic pool is not medically necessary.