

Case Number:	CM15-0175326		
Date Assigned:	09/16/2015	Date of Injury:	09/24/1985
Decision Date:	10/19/2015	UR Denial Date:	08/05/2015
Priority:	Standard	Application Received:	09/04/2015

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 63 year old female, who sustained an industrial injury on 9-24-85. The injured worker is undergoing treatment for fibromyalgia, lumbar spondylolisthesis and cervical spondylosis. Medical records dated 5-27-15 indicate the injured worker complains of "recent flare up of fibromyalgia as well as increasing widespread pain." The note dated 8-7-15 indicates she is requesting gym membership renewal. The same note also indicates, "acupuncture has been effective in the past. She has had no recent treatment." Physical exam dated 7-8-15 notes stiff guarded gait, diffuse spine tenderness and painful decreased cervical and lumbar range of motion (ROM). Treatment to date has included interferential unit, acupuncture, gym membership, exercise in warm pool and Cymbalta 7-8-15 indicates discontinued because "poorly tolerated." The original utilization review dated 8-5-15 indicates the request for acupuncture treatment X6 and gym membership renewal for access to warm pool exercises is non-certified noting lack of documentation of functional improvement from prior acupuncture and lack of documentation that home exercise program (HEP) has not been effective or documentation of functional improvement from prior gym membership.

IMR ISSUES, DECISIONS AND RATIONALES

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

Acupuncture treatment six (6) visits: Upheld

Claims Administrator guideline: Decision based on MTUS Acupuncture Treatment 2007.

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment 2007. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain section, Acupuncture treatment.

Decision rationale: Pursuant to the Acupuncture Medical Treatment Guidelines and the Official Disability Guidelines, acupuncture treatment, 6 visits are not medically necessary. Acupuncture is not recommended for acute low back pain. Acupuncture is recommended as an option for chronic low back pain using a short course of treatment in conjunction with other interventions. The Official Disability Guidelines provide for an initial trial of 3-4 visits over two weeks. With evidence of objective functional improvement, a total of up to 8 to 12 visits over 4 to 6 weeks may be indicated. The evidence is inconclusive for repeating this procedure beyond an initial short period. In this case, the injured worker's working diagnoses are fibromyalgia; bilateral carpal tunnel syndrome; L4 - L5 spondylolisthesis; and cervical spondylosis. Date of injury is September 24, 1985 (30 years ago). Request for authorization is July 30, 2015. According to a July 8, 2015 progress, the treating provider is requesting additional acupuncture for fibromyalgia. There has been no recent treatment. Objectively, gait is stiff and guarded and there is tenderness to palpation spine. The total number of acupuncture treatment sessions to date is not specified. There is no documentation demonstrating objective functional improvement. There are no compelling clinical facts indicating additional acupuncture is clinically indicated. The guidelines recommend up to 8 - 12 visits. Based on clinical information in the medical record, peer-reviewed evidence-based guidelines, no documentation demonstrating objective functional improvement from prior acupuncture, no documentation indicating the total number of acupuncture sessions and no compelling clinical facts indicating additional acupuncture is clinically warranted, acupuncture treatment, 6 visits are not medically necessary.

Gym membership renewal for access to warm pool exercises: 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), Low Back Chapter, Gym memberships.

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, Gym membership renewal for access to warm pool exercises 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's working diagnoses are fibromyalgia; bilateral carpal tunnel syndrome; L4 - L5 spondylolisthesis; and cervical spondylosis. Date of injury is September 24, 1985 (30 years ago). Request for authorization is July 30, 2015. According to a July 8, 2015 progress, the treating provider is requesting additional acupuncture for fibromyalgia. There has been no recent treatment. Objectively, gait is stiff and guarded and there is tenderness to palpation spine. The total number of acupuncture treatment sessions to date is not specified. Gym memberships, health clubs, swimming pools, athletic clubs, etc., would not generally be considered medical treatment and are therefore not covered under these guidelines. Based on the clinical information in the medical record, peer-reviewed evidence-based guidelines, and guideline non-recommendations for gym membership, gym membership renewal for access to warm pool exercises is not medically necessary.