

Case Number:	CM15-0069467		
Date Assigned:	04/17/2015	Date of Injury:	01/26/2012
Decision Date:	05/18/2015	UR Denial Date:	03/18/2015
Priority:	Standard	Application Received:	04/13/2015

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: North Carolina

Certification(s)/Specialty: Family Practice

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 (IW) is a 35-year-old male who sustained an industrial head injury on 01/26/2012. Diagnoses include traumatic brain injury, postconcussive syndrome, posttraumatic headaches, migraines, visual disturbance, depression and personality changes. Treatment to date has included medications, speech therapy, occupational therapy, cognitive behavioral therapy, psychotherapy, psychiatry and physical therapy. Diagnostics included CT angiogram, CT scans, x-rays and MRIs. According to the progress notes dated 2/26/15, the IW reported daily headaches; decreased short-term memory; difficulty with concentration, focus, multitasking and problem solving; intermittent blurred vision; personality and behavioral changes; panic attacks and insomnia. A request was made for [REDACTED] program and a one-year gym membership.

IMR ISSUES, DECISIONS AND RATIONALES

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

[REDACTED] **program:** 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), Head, Skilled nursing facility care.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG, head trauma.

Decision rationale: The California MTUS and The ACOEM do not specifically address this request. The ODG states rehab with neuropsychology and neurophysiologic intervention is recommended post head injury. This patient does have a history of traumatic head injury. However, the patient has already completed the requested program once before without objective measurements of improvement. Therefore the request is not medically necessary.

Gym membership for 1 year: 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), Head, Exercise.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG, gym membership.

Decision rationale: The California MTUS and the ACOEM do not specifically address gym memberships. Per the Official Disability Guidelines, gym memberships are not recommended 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 specialized equipment not available at home. Treatment needs to be monitored and administered by medical professionals. There is no included documentation, which shows failure of home exercise program. There is no evidence of a program at the gym being supervised by medical professionals. The criteria for gym membership as outlined above have not been met. Therefore the request is not medically necessary.