

<b>Case Number:</b>	CM15-0071302		
<b>Date Assigned:</b>	04/21/2015	<b>Date of Injury:</b>	06/13/2003
<b>Decision Date:</b>	05/19/2015	<b>UR Denial Date:</b>	03/26/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	04/14/2015

### 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 56 year old female, who sustained an industrial injury on June 13, 2003. She reported low back pain. The injured worker was diagnosed as having lumbar disc displacement without myelopathy, long term use of medications, sciatica, stenosis of the lumbar spine and lumbar disc displacement without myelopathy. Treatment to date has included radiographic imaging, diagnostic studies, conservative care, aquatic therapy, lumbar steroid epidural injection, medications and work restrictions. Currently, the injured worker complains of low back pain with radiation into the right lower extremity to the plantar surface of the foot and sleep difficulties. The injured worker reported an industrial injury in 2003, resulting in the above noted pain. She was treated conservatively without complete resolution of the pain. Evaluation on December 8, 2014, revealed continued pain. Medications and a gym membership with pool access were requested.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**One (1) year gym membership with pool access:** 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 - Lumbar and Thoracic (Acute and Chronic).

**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, one-year gym membership with pool access 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 lumbar disc displacement without myelopathy; sciatica; and stenosis lumbar spine. The injured worker has been attending aquatic therapy and has completed all aquatic therapy authorized. The injured worker feels aquatic therapy is more beneficial than land-based therapy. The injured worker would like to lose weight and feels she can do so with ongoing aquatic therapy. The treating provider is recommending a gym membership so the injured worker can have pool access to continue her water exercises independently. 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. Consequently, absent guideline recommendations for gym memberships (not recommended and covered under the guidelines), one-year gym membership with pool access is not medically necessary.