

<b>Case Number:</b>	CM15-0073180		
<b>Date Assigned:</b>	04/23/2015	<b>Date of Injury:</b>	05/01/2000
<b>Decision Date:</b>	05/20/2015	<b>UR Denial Date:</b>	03/26/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	04/16/2015

### 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 49 year old female, who sustained an industrial injury on May 1, 2000. She has reported headache, neck pain, back pain, shoulder pain, arm pain, and leg pain. Diagnoses have included lumbosacral discogenic disease, cervicothoracic spondylosis, bilateral shoulder impingement syndrome, fibromyalgia, depression, and anxiety. Treatment to date has included aqua therapy (which was noted to be helpful), medications, and physical therapy. A progress note dated February 27, 2015 indicates a chief complaint of headache, neck pain, mid back pain, lower back pain, depression, anxiety, insomnia, and urinary voiding difficulties. The treating physician documented a plan of care that included a gym membership for warm pool therapy.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Gym membership for warm pool therapy:** 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 (updated 03/24/15) - Online Version.

**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 for warm pool therapy 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 affective spectrum disorder/fibromyalgia; and L5 - S1 discogenic disease. According to a progress note dated February 27, 2015, the documentation indicates the injured worker did benefit from previous aquatic therapy. Reportedly, the injured worker had two years of supervised therapy. This resulted in a diminution of pain and improvement in well-being. A gym membership, however, is unsupervised. 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 with compelling clinical documentation, gym membership for warm pool therapy is not medically necessary.