

Case Number:	CM13-0004554		
Date Assigned:	11/22/2013	Date of Injury:	11/29/2012
Decision Date:	01/15/2014	UR Denial Date:	07/17/2013
Priority:	Standard	Application Received:	07/29/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Physical Medicine and Rehabilitation and is licensed to practice in California. 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 physician 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

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 underlying date of injury in this case is 11/29/2012. Treating diagnoses include uncontrolled weight as well as gait disturbance, worsening snoring and daytime fatigue with possible sleep apnea. The patient's initial mechanism of injury is that she slipped and fell in an employee parking lot on a rainy day and developed an injury to her left knee. With regard to the patient's knee, she has been diagnosed with a left knee residual medial collateral ligament laxity as well as underlying articular cartilage damage to the medial joint line and a patellar tracking abnormality. A physician progress note as of 10/21/2013 is handwritten and difficult to read though appears to indicate the diagnosis of morbid obesity with a body mass index greater than 55 and notes that the patient would need a weight loss program to reduce the risk of worsening or failure of treatment to her injuries. That note indicates the patient is unable to exercise due to her orthopedic injuries. Therefore, that request strongly recommends a Lindora weight loss program and water aerobics.

IMR ISSUES, DECISIONS AND RATIONALES

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

Weight Watchers supervised weight loss program for 10 weeks: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 3 Initial Approaches to Treatment Page(s): 45.

Decision rationale: ACOEM Guidelines, Chapter 3 Treatment, page 45, states, "If the patient is not recovering as he or she expects, the patient and clinician should seek reasons for the delay and address them appropriately." Given the patient's difficulty participating in a rehabilitation program and difficulty with weight management, further medical treatment to address this condition would be supported by the guidelines. However, the medical records are unclear at this time regarding the nature of medical supervision for the proposed Weight Watchers weight loss program. This treatment cannot be considered to be medically necessary without an understanding of the degree of medical supervision. Therefore, this request is not medically necessary.

Pool therapy 2 times a week for 6 weeks: Overturned

Claims Administrator guideline: Decision based on MTUS ACOEM.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Aquatic therapy section Page(s): 22.

Decision rationale: The Chronic Pain Medical Treatment Guidelines Section on Aquatic Therapy, page 22, states, "Recommended as an optional form of exercise therapy, where available, as an alternative to land-based physical therapy." The medical records at this time outline that this patient is over weight which substantially limits the patient's ability to perform land-based exercise. The guidelines do support indication for aquatic therapy in this situation. This request is medically necessary.