

Case Number:	CM13-0012871		
Date Assigned:	09/24/2013	Date of Injury:	04/28/2009
Decision Date:	01/21/2014	UR Denial Date:	08/09/2013
Priority:	Standard	Application Received:	08/16/2013

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 Orthopedic Surgery 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 patient is a 55-year-old female with work-related, bilateral knee injury from 04/28/2009 and with morbid obesity. An AME report from 10/02/2012 demonstrates weight of 258 lbs. An exam note from 06/11/2013 demonstrates weight of 214 lbs.

IMR ISSUES, DECISIONS AND RATIONALES

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

A medically supervised weight loss program: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 7, 98-99, Postsurgical Treatment Guidelines Page(s): 27.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 92.

Decision rationale: Per the MTUS Chronic Pain Medical Treatment Guidelines, "Functional restoration is an established treatment approach that aims to minimize the residual complaints and disability resulting from acute and/or chronic medical conditions." Functional restoration can be considered if there is a delay in return to work or a prolonged period of inactivity, according to ACOEM Practice Guidelines. Functional restoration is the process by which the individual acquires the skills, knowledge and behavioral change necessary to avoid preventable complications and assume or re-assume primary responsibility ("locus of control") for his/her

physical and emotional well-being post-injury. The individual thereby maximizes functional independence and pursuit of vocational and avocational goals, as measured by functional improvement. In this case, the patient has demonstrated evidence of weight loss independent of a supervised weight loss program. The determination is non-certification.