

Case Number:	CM13-0026452		
Date Assigned:	12/11/2013	Date of Injury:	10/27/2010
Decision Date:	01/30/2014	UR Denial Date:	09/06/2013
Priority:	Standard	Application Received:	09/19/2013

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 Family Practice 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:

This worker's date of injury was 10/27/'10. She is a 52 year old woman with obesity, as defined by a BMI of 39 and bilateral knee pain from degenerative arthritis. Knee x-rays taken on May 22, 2013, reveal bilateral knee arthritis. She has had arthroscopic surgery of her right knee consisting of partial meniscectomies, synovectomy, and chondroplasty. Specialists have recommended a total knee arthroplasty (replacement) for her R knee.

IMR ISSUES, DECISIONS AND RATIONALES

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

Continuing with [REDACTED] weight loss program: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Medical Disability Advisor by [REDACTED], [REDACTED] Obesity.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Overview of Therapy for Weight Loss in Adults. Up-to-date, By [REDACTED], et al; accessed online

Decision rationale: This woman has obesity, as defined by the body mass index; her BMI is 39. She does not have significant co-morbidities such as: diabetes, sleep apnea, coronary disease or other manifestations of atherosclerosis that would place her in a high risk category. There is no

documentation in the clinical notes of any nutritional counseling nor any patient recorded dietary logs or exercise logs that would indicate that a 6 month trial of self care monitored by her clinician has either been tried or failed. A literature search of peer reviewed journals failed to find compelling evidence that referral to "weight loss programs" offers any significant measurable benefit over clinician monitored dietary interventions in the outpatient medical setting. The referral to the [REDACTED] Program is non-certified.