

Case Number:	CM13-0045652		
Date Assigned:	12/27/2013	Date of Injury:	06/10/2005
Decision Date:	04/30/2014	UR Denial Date:	10/25/2013
Priority:	Standard	Application Received:	11/12/2013

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. The expert reviewer is Board Certified in Physical Medicine & Rehabilitation has a subspecialty in Pain Management 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 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/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 is patient reported a date of injury of 6/10/05. A utilization review determination dated 10/25/13 recommends non-certification of continued [REDACTED] weight loss program x 3 months. Continued pain management x 3 months and continued psychotherapy x 3 months were modified to 6 weeks each. An 11/1/13 medical report identifies that the patient has continued to treat with psychiatry and pain management. He continues to be depressed and complain of weight gain. He has not been able to lose any more weight and weighs approximately 229 pounds. He has back and leg pain. On exam, SLR is positive. Left shoulder ROM is limited. He is using a cane for ambulation.

IMR ISSUES, DECISIONS AND RATIONALES

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

CONTINUED PAIN MANAGEMENT TIMES 3 MONTHS: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain Chapter, Office Visits.

Decision rationale: Regarding the request for continued pain management times 3 months, it is noted that this request was modified to certify 6 week by the previous utilization review. California MTUS does not specifically address the issue. ODG does support the utilization of office visits, citing that the need for a clinical office visit with a health care provider is individualized based upon a review of the patient concerns, signs and symptoms, clinical stability, and reasonable physician judgment. Within the documentation available for review, there is documentation that the patient has been treating with pain management, although the documentation does not clearly identify the efficacy of prior treatment and, consequently, the medical necessity of ongoing treatment. While an additional visit may be appropriate to clarify the patient's issues with regard to pain management and identify the possible treatment options going forward, there is no clear indication for 3 additional months of pain management and, unfortunately, there is no provision for modification of the current request. In light of the above issues, the currently requested continued pain management times 3 months are not medically necessary.

CONTINUED PSYCHOTHERAPY TIMES 3 MONTHS: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 23.

Decision rationale: Regarding the request for continued psychotherapy times 3 months, it is noted that this request was modified to certify 6 week by the previous utilization review. California MTUS supports an initial trial of 3-4 psychotherapy visits over 2 weeks and, with evidence of objective functional improvement, total of up to 6-10 visits over 5-6 weeks (individual sessions). Within the documentation available for review, there is no clear documentation of objective functional improvement to support the medical necessity of continued psychotherapy. Additionally, the proposed duration of treatment exceeds the recommendations of the CA MTUS and, unfortunately, there is no provision for modification of the current request. In light of the above issues, the currently requested continued psychotherapy times 3 months are not medically necessary.

CONTINUATION OF [REDACTED] WEIGHT LOSS PROGRAM TIMES 3 MONTHS:
Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Systematic review: an evaluation of major commercial weight loss programs in the United States. <http://www.ncbi.nlm.nih.gov/pubmed/15630109>)

Decision rationale: Regarding the request for continuation of [REDACTED] Weight Loss Program times 3 months, CA MTUS and ODG do not address the issue. A search of the National Library

of identified an article entitled "Systematic review: an evaluation of major commercial weight loss programs in the United States." This article noted that, with the exception of 1 trial of [REDACTED], the evidence to support the use of the major commercial and self-help weight loss programs is suboptimal, and controlled trials are needed to assess the efficacy and cost-effectiveness of these interventions. Within the documentation available for review, the documentation does not clearly describe the patient's attempts at diet modification and a history of failure of reasonable weight loss measures such as dietary counseling, behavior modification, caloric restriction, and exercise within the patient's physical abilities, as well as significant benefit from prior use of the program. In light of the above issues, the currently requested continuation of [REDACTED] Weight Loss Program times 3 months is not medically necessary.