

Case Number:	CM13-0047566		
Date Assigned:	12/27/2013	Date of Injury:	09/24/2010
Decision Date:	03/06/2014	UR Denial Date:	10/29/2013
Priority:	Standard	Application Received:	11/04/2013

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 Geriatrics is licensed to practice in New York. 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 injured worker is a 49 year old woman with a date of injury of 9/24/10 involving her knees and low back. She is status post left knee arthroscopy in 8/11, right knee arthroscopy, debridement and meniscectomy in 5/11, lumbar facet injections and multiple other diagnostic and therapeutic modalities. She was seen on 10/21/13 in a follow up primary treating physician visit for evaluation for bariatric surgery and knee replacements. Her weight was 210lbs and height 5'4" with a BMI of 36kg/m2. Her exam was described as unchanged with bilateral knee braces and guarded/restricted lumbar range of motion. She was mobile with a cane and was intact neurologically. The records indicate that she has participated in [REDACTED] and lost 10lbs in 8 months. Referral to a bariatric surgeon was recommended and is at issue in this review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Bariatric consultation and surgery: 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 UpToDate article "Bariatric operations for management of obesity: Indications and preoperative preparation".

Decision rationale: This injured worker has a BMI of 36kg/m², and bariatric surgery is at issue. Per UpToDate, Adults with a BMI 35.0 to 39.9 kg/m² must have at least one serious co morbidity, including but not limited to: Type 2 diabetes, Obstructive sleep apnea (OSA), Hypertension, Hyperlipidemia, Obesity-hypoventilation syndrome (OHS), Pickwickian syndrome (combination of OSA and OHS), Nonalcoholic fatty liver disease (NAFLD), Nonalcoholic steatohepatitis (NASH), Pseudotumor cerebri, Gastroesophageal reflux disease, Asthma, Venous stasis disease, Severe urinary incontinence, Debilitating arthritis, and Impaired quality of life. Though she may have osteoarthritis, it is not documented as debilitating and she has not trialed other options for weight loss prior to surgical intervention other than weight watchers. The records do not support the medical necessity for bariatric surgery and consultation.