MAXIMUS Federal Services

Case Number:	CM13-0050895		
Date Assigned:	12/27/2013	Date of Injury:	10/30/1992
Decision Date:	06/30/2014	UR Denial Date:	10/23/2013
Priority:	Standard	Application Received:	11/13/2013

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 Family Practice and is licensed to practice in Texas. 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:

The injured worker is 49-year-old male with a reported injury on 10/30/1992, due to unknown mechanism. The injured worker has complaints of weight gain since the date of injury due to immobility issues. The injured worker has ongoing low back pain, multilevel herniated nucleus pulposes (HNPs) of the lumbar spine, lumbar radiculopathy, and had epidural steroid injections. The injured worker has a body mass index (BMI) of 35.95. There is no documentation of physical therapy or a personalized exercise program. The treatment plan was for phentermine 37.5mg #30 and a medically managed weight loss program. The request for authorization form was not submitted for review.

IMR ISSUES, DECISIONS AND RATIONALES

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

PHENTERMINE 37.5MG #30, WITH NO REFILL: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation http://www.ncbi.nlm.nih.gov/pubmedhealth/PMHT0011706/.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation http://www.rxlist.com

Decision rationale: Phentermine is used for obesity as short term plan of weight loss with a low caloric diet. Phentermine is an appetite suppressant, which is to be used along with diet and exercise. The submitted documentation lacks evidence of physical therapy. Also the request should state if this is initial course and the frequency. Therefore, the request is not medically necessary.