

Case Number:	CM13-0059702		
Date Assigned:	12/30/2013	Date of Injury:	10/24/2012
Decision Date:	06/05/2014	UR Denial Date:	11/26/2013
Priority:	Standard	Application Received:	12/02/2013

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 Occupational Medicine 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:

The applicant is a represented [REDACTED] employee who has filed a claim for chronic low back pain reportedly associated with an industrial injury of October 24, 2012. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representation; muscle relaxants; unspecified amounts of acupuncture; and extensive periods of time off of work. In a Utilization Review Report dated November 26, 2013, the claims administrator conditionally denied a weight loss program, stating that the attending provider had not furnished compelling documentation of what form of weight program was being sought here. The applicant's attorney subsequently appealed. A November 11, 2013 progress note was notable for comments that the applicant reported persistent low back pain. Limited range of motion is noted. The applicant received acupuncture treatments. The applicant was described as off of work and was using Motrin and Flexeril for pain relief. In an undated letter, the applicant's attending provider stated that the applicant had tried to lose weight through dieting, without benefit. A Lindora weight loss program was therefore being sought. An October 24, 2013 progress note was notable for comments that the applicant reported persistent low back pain. The applicant reported she had gained 35 pounds since the outset of her injury. The applicant was on Soma, Duexis, Norco, Motrin, and Ambien, it was stated. The applicant stood 5 feet 4 inches tall, weighed 188 pounds. The applicant was asked to pursue a weight loss program. The applicant's work status was not provided, although it was suggested that she was not in fact working.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 WEIGHT LOSS PROGRAM: Upheld

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 1 Prevention Page(s): 11.

Decision rationale: As noted in the MTUS-adopted ACOEM Guidelines in Chapter 1, page 11, strategies based on modification of an applicant's risk factors, including weight loss, may be less certain, more difficult, and possibly less cost effective. There is no support in ACOEM, then, for the weight loss program being proposed here as such programs have been deemed generating only less certain, more difficult, and less cost effective outcomes. Therefore, the request for the Weight Loss Program is not medically necessary.