

Case Number:	CM13-0060865		
Date Assigned:	12/30/2013	Date of Injury:	02/25/2013
Decision Date:	05/07/2014	UR Denial Date:	11/21/2013
Priority:	Standard	Application Received:	12/04/2013

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 Internal Medicine and 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 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 claimant is a 39 year old female who sustained an industrial injury on 02/25/2013. The mechanism of injury was not provided. Her diagnoses include lumbar strain, and lumbar disc disease at L3-L4, and L4-L5. She continues to complain of low back pain. Treatment has included medical therapy, chiropractic manipulation, and epidural steroid injections. Her treating provider has requested a weight loss program to help with weight loss to improve her low back pain.

IMR ISSUES, DECISIONS AND RATIONALES

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

WEIGHT LOSS PROGRAM 1 UNIT: 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 Medscape Internal Medicine- Weight Loss Programs 2012

Decision rationale: There is no specific documentation addressed by ACOEM/MTUS Guidelines for weight loss requirements for chronic pain conditions. Per Medscape Internal Medicine weight loss is beneficial for partial relief of symptoms for patients with obesity and

arthritis. The provider has not provided a specific goal for weight loss and per the documentation the patient has not undergone any counseling on lifestyle and behavioral modifications, such as diet and exercise. The specific weight loss program was not identified. Medical necessity for the requested service has not been established.. The requested service is not medically necessary.