

Case Number:	CM14-0006551		
Date Assigned:	03/03/2014	Date of Injury:	01/27/2012
Decision Date:	07/11/2014	UR Denial Date:	01/08/2014
Priority:	Standard	Application Received:	01/17/2014

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:

This is a 30-year-old female with a date of injury of 1/27/2012. She was working as an Office Technician for [REDACTED]. While walking from the inmate rehab building she stepped in a gopher hole and fell, landing in another gopher hole and sunk further. Her left knee and lower back area were affected. In a progress note dated 12/18/13, the patient reported pain in her lower back, intermittent numbness and tingling of the legs. She is having limited and painful movement of her back. Objective findings include that she weighs 202 lbs. and has pain with flexion and extension maneuvers. She has gained about 17 pounds since her injury. Diagnostic impression: lumbar spine herniated disc, lumbar spine radiculopathy
Treatment to date: home exercise program, acupuncture, medication management, activity modification
A utilization review decision dated 1/18/14 denied the request for weight loss program. There is no indication that loss of this weight would have any benefit on her low back pain. Rather, a recommended independent exercise program (including walking) coupled with calorie restriction is likely to help her reduce weight. A supervised weight-loss program will provide no benefit to either cure or relieve her low back symptomatology. Medical necessity for a weight loss program is not established.

IMR ISSUES, DECISIONS AND RATIONALES

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

WEIGHT LOSS PROGRAM: 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 Other Medical Treatment Guideline or Medical Evidence: Annals of Internal Medicine, Volume 142, pages 1-42, January 2005 "Evaluation of the Major Commercial Weight Loss Programs." by Tsai, AG and Wadden, TA; Aetna Clinical Policy Bulletin: Weight Reduction Medications and Programs.

Decision rationale: California Medical Treatment Utilization Schedule (MTUS) and Official Disability Guidelines (ODG) do not address the issue of weight loss program. The 7/3/13 medical report states that this patient's height is 5'5" and weight 185 lbs. As a female, her BMI is 30.8 which would make her moderately obese. However, there is no mention in the physician reports regarding adjusting patient's diet and a home exercise program as first line treatment. Also, according to the Aetna Clinical Policy Bulletin a complete blood count, dexamethasone suppression test, EKG, Glucose Tolerance Test, Thyroid Function tests, metabolic and chemistry profiles, urinalysis, and lipid profile are all medical necessary for the evaluation of overweight or obese individuals in order to rule out treatable medical conditions. There is no documentation that these tests have been performed. Therefore, the request for a weight loss program is not medically necessary.