

Case Number:	CM14-0010958		
Date Assigned:	02/21/2014	Date of Injury:	10/17/2008
Decision Date:	08/05/2014	UR Denial Date:	01/07/2014
Priority:	Standard	Application Received:	01/27/2014

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 Internal 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 55-year-old male with a 10/17/08 date of injury. He is a truck driver who was injured when he was pushing the clutch of the truck with his left foot and felt pain in his lower back. On a recent MRI scan, the patient was noted to have scar tissue on a recent MRI around the nerve root but no active nerve compression. Objective exam: right EHL and anterior tibialis weakness which is very mild at this point. It is about 5/5. He has numbness in the L5 nerve distribution. The patient is noted to have weighed 300 pounds when he was initially injured, and now weighs 335. The provider states that helping him lose 70 to 75 pounds weight loss and does not believe the patient would be a candidate to have any more surgeries on the nerve root. Diagnostic Impression: s/p L5-S1 fusion and removal of hardware and then I&D. Treatment to date: medication management, L5-S1 fusion, activity modification. A UR decision dated 1/7/14 denied the request for a Medical Weight Loss Program since there is insufficient clinical information provided to support the request. There is no indication that diet and independent exercise have been tried and failed. There are no measurable objectives and goals provided to support the request.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 MEDICAL 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: The California MTUS and ODG do not address this issue. Physician supervised weight loss programs are reasonable in patients who have a documented history of failure to maintain their weight at 20 % or less above ideal or at or below a BMI of 27 when the following criteria are met: BMI greater than or equal to 30 kg/m; or a BMI greater than or equal to 27 and less than 30 kg/m and one or more of the following comorbid conditions: coronary artery disease, diabetes mellitus type 2, hypertension (systolic blood pressure greater than or equal to 140 mm Hg or diastolic blood pressure greater than or equal to 90 mm Hg on more than one occasion), obesity-hypoventilation syndrome (Pickwickian syndrome), obstructive sleep apnea, or dyslipidemia (HDL cholesterol less than 35 mg/dL; or LDL cholesterol greater than or equal to 160 mg/dL; or serum triglyceride levels greater than or equal to 400 mg/dL. However, weight loss is medically necessary because morbid obesity is a recognized Public Health and CDC identified health risk. However, although the patient is noted to have a weight of 335 pounds, it is unclear what his height is, therefore a BMI cannot be calculated. In addition, there is no description of comorbidities. There is no documentation of failure of an independent home exercise and diet program. Therefore, the request for the Medical Weight Loss Program was not medically necessary.