

Case Number:	CM14-0159114		
Date Assigned:	10/02/2014	Date of Injury:	02/21/2012
Decision Date:	10/29/2014	UR Denial Date:	09/04/2014
Priority:	Standard	Application Received:	09/29/2014

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 Physical Medicine and Rehabilitation has a subspecialty in Interventional Spine 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 patient is a 34 years old female with an injury date on 02/21/2012. Based on the 08/21/2014 progress report provided by [REDACTED], the diagnoses are:1. Lumbar spine sprain and strain with radiculopathy to the LLE2. Left sacroilitis3. S/P left knee sx with residual4. Antalgic gaitAccording to this report, the patient complains of intermittent sharp left knee pain. The patient also complains of constant left lower back pain that radiates to the left lower extremities. Activities such as bending, moving, and sitting would aggravate the pain. The patient had gained about 40 pounds since injury. The 08/18/2014 report indicates left knee pain is aggravated with squatting, bending and twisting. The patient is performing self-directed exercise and taking anti-inflammatory medications. Physical exam findings of the left knee were within normal limits. There were no other significant findings noted on this report. The utilization review denied the request on 09/04/2014. [REDACTED] is the requesting provider, and he provided treatment reports from 04/03/2014 to 08/21/2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Weight Loss Programs: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Morgan, Phillip J. et al. " 12- month Outcomes

and Process Evaluation of the SHED-IT-RCT: An Internet Based Weight Loss Program Targeting Men." Obesity 19.1 (2011: 142-151

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: Aetna: Clinical Policy Bulletin: Weight Reduction Medications and Programs. Number: 0039.

Decision rationale: According to the 08/21/2014 report by [REDACTED] this patient presents with intermittent left knee pain and constant left lower back pain. The treater is requesting weight loss program. Regarding weight loss programs, MTUS and ODG Guidelines do not provide a discussion. AETNA guidelines are used which considers weight reduction medically necessary and states "considered medically necessary for weight reduction counseling in adults who are obese (as defined by BMI 30 kg/m²)." AETNA allows for medically supervised programs only and not other programs such as exercise programs or use of exercise equipment, Rice diet or other special diet supplements (e.g., amino acid supplements, Optifast liquid protein meals, [REDACTED] pre-packaged foods, or phytotherapy), [REDACTED], [REDACTED], [REDACTED], [REDACTED], or similar programs. In this case, the treater does not provide BMI. There is no discussion as to what this weight loss program is to entail, whether or not it is medically supervised, what type of program it is therefore request is not medically necessary.