MAXIMUS Federal Services

Case Number:	CM14-0020745		
Date Assigned:	06/06/2014	Date of Injury:	03/16/2001
Decision Date:	07/14/2014	UR Denial Date:	01/31/2014
Priority:	Standard	Application Received:	02/19/2014

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 Emergency Medicine, and is licensed to practice in Florida. 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 patient is a 53 year-old with a date of injury of 03/16/01. A progress report dated 01-07-14 identified subjective complaints of neck, mid and low back pain. Objective findings included tenderness of the paraspinal muscles and decreased range-of-motion. Motor and sensory functions as well as reflexes were normal. Diagnoses included cervical and lumbar spondylosis and disc disease. Treatment has included exercise and physical therapy as well as NSAIDs, oral analgesics, and muscle relaxants. An 11/14/13 psychological evaluation noted a weight increase from 190 to 303 pounds. A gym membership was recommended as well as gastric bypass. An RFA dated 01/13/14 requested the same. A Utilization Review determination was rendered on 01/31/14 recommending non-certification of "gym membership and gastric bypass".

IMR ISSUES, DECISIONS AND RATIONALES

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

GYM MEMBERSHIP: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Gym Membership.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Exercise Page(s): 46-47. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain, Exercise.

Decision rationale: The Medical Utilization Treatment Schedule (MTUS) and the Official Disability Guidelines (ODG) do not address exercise related to obesity. However, they do state that exercise is recommended for all forms of pain. However, they note that there is insufficient evidence to recommend any particular exercise regimen over another. In this case, the record does document the medical necessity for an exercise program; however, there is no documentation for the medical necessity for a gym membership.

GASTRIC BYPASS: 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 UpToDate, Bariatric operations for management of obesity: indications and preoperative preperation.

Decision rationale: Neither the Medical Treatment Utilization Schedule (MTUS) nor the Official Disability Guidelines (ODG) addresses bariatric surgery for obesity. Authoritative sources note that indications for gastric bypass are based upon body mass index. Candidates should also undergo preoperative psychological and nutritional assessment. In this case, the claimant had reached 303 pounds, which made her a likely candidate for bypass, though her BMI was not specified. Likewise, the record did not outline a medical or psychological assessment, nor the failure of a physician supervised attempt at weight loss. Therefore, in this case, the record does not document the medical necessity for a gastric bypass.