

Case Number:	CM14-0028426		
Date Assigned:	06/16/2014	Date of Injury:	01/26/2008
Decision Date:	08/04/2014	UR Denial Date:	02/27/2014
Priority:	Standard	Application Received:	03/06/2014

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 New York and North Carolina. 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 58 year old man who was working as a concrete finisher on 1/26/08, when he slipped while walking on muddy ground while carrying equipment. His left leg slipped into a concrete joint. He fell backward, and landed on his back. He had bilateral knee and low back pain, diagnosed as a lumbosacral strain. He has had arthroscopic surgery on the left and is s/p arthroplasty, and revision on the right. He is morbidly obese, with a BMI over 40%, requesting authorization for a weight loss program. The orthopedist recommends weight loss to manage pain, especially since revision arthroplasty has not been approved to date.

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: Tsai AG and TA Wadden. Systematic Review: An Evaluation of Major Commercial Weight Loss Programs in the United States. Ann Intern Med. 2005;142(1):56-66.

Decision rationale: The MTUS Guidelines do not address weight loss programs, nor do ODG guidelines. There is no detailed description regarding what is desired, length of treatment, goals of treatment, etc. In a review by Tsai and Wadden, they found that with the exception of one trial of [REDACTED], the evidence to support the use of the major commercial and self-help weight loss programs is suboptimal. Controlled trials are needed to assess the efficacy and cost-effectiveness of these interventions. It is not authorized because medical necessity has not been achieved or proven, and because there is no evidence to support its use.