MAXIMUS Federal Services

Case Number:	CM14-0028430		
Date Assigned:	06/16/2014	Date of Injury:	07/14/2008
Decision Date:	07/16/2014	UR Denial Date:	02/05/2014
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 Neuromusculoskeletal Medicine, and is licensed to practice in Arizona. 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 64-year-old male who sustained an injury on July 14, 2008 as result of falling from a chair that he was standing upon, landing on his back and striking his head. Since then he has had neck, lower back, right knee and bilateral upper extremity pain; predominately his wrist. On examination his lumbar region is pained and tender. His range of motion is stiff, achy and limited. He has a positive bilateral straight leg raise. His right knee has midline joint tenderness, patellofemoral crepitus, and a positive McMurray's test with stable ligamentous components. His cervical spine has paracervical trapezius and interscapular muscle tenderness with limited range of motion. The patient's treatment plan includes acupuncture, the use of Ultracet for pain management and condrolite to slow the progression/development of arthritis. The use of Apptrim is initially documented on the 11-21-2013 PR-2 with the expressed expectation "to stimulate weight loss". The patient has been diagnosed with cervical and lumbar spine sprain/strain with a possible internal derangement of his right knee. An arthroscopic procedure on July 23, 2009 found 'no pathology noted.' In dispute is the prescription of Apptrim to stimulate weight loss.

IMR ISSUES, DECISIONS AND RATIONALES

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

APPTRIM #120: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

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: http://ptloffice.com/downloads/marketing/AppTrim_Package_Insert_Sept_2012.pdf.

Decision rationale: AppTrim is a product intended for the clinical nutritional management of the metabolic processes in patients with obesity, morbid obesity and metabolic syndrome. It has demonstrated significant functional improvements when used for the nutritional management of the metabolic processes associated with obesity, morbid obesity, and metabolic syndrome. The use of AppTrim in patients with obesity disorders results in the induction and maintenance of appetite suppression and suppression of carbohydrate cravings. Usual dose is two capsules at mid-morning with two additional capsules in the evening. On a routine outpatient (and inpatient) documentation should include a set of vital signs. On not one of the patient's Primary Treating physical progress notes are vital signs documented, to include height and weight to appropriate calculate the patient's body mass index (BMI). Based upon the medical documentation that accompanied this request, no attempt at weight loss, aside from a 10 week course at [redacted], has been attempted. It is unknown, based solely on the documentation provided, if the patient has in fact an obesity issue. I find the request has no merit and is not authorized.