

<b>Case Number:</b>	CM14-0068340		
<b>Date Assigned:</b>	07/14/2014	<b>Date of Injury:</b>	10/26/2011
<b>Decision Date:</b>	08/13/2014	<b>UR Denial Date:</b>	04/26/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	05/13/2014

### 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 General Surgery 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 44 year old male is seeking authorization for bariatric surgery. He weighs in at 415 pounds with a height of 5' 6 and a BMI of 67. He calculates out as super obese. He has a torn left medial meniscus. Surgery at this weight is not felt to be appropriate. The knee is symptomatic and on NSAIDs he has GI problems with burning in the chest and abdomen.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Bariatric Surgery:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Pharmacological and surgical management of Obesity in primary care: a clinical practice guideline from the American College of Physicians.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Non-MTUS American Association of Clinical Endocrinologists, The Obesity Society, and American Society for Metabolic & Bariatric Surgery medical guidelines for clinical practice for the perioperative nutritional, metabolic, and nonsurgical support of the bariatric surgery patient. 2009 Apr, (<https://prnmail.com/services/medrefpreview.aspRefID=35381> and on the Non-MTUS Updated Position Statement on Sleeve Gastrectomy as a Bariatric Procedure. 2011 Oct 28, <https://prnmail.com/services/medrefpreview.aspRefID=41733> and on the Non-MTUS Diabetes

Care. 2013 May;36(5):1335-40. doi: 10.2337/dc12-1395. Epub 2013 Jan 28 and on the Non-MTUS Evaluation of Current Eligibility Criteria for Bariatric Surgery: Diabetes prevention and risk factor changes in the Swedish Obese Subjects (SOS) study, S holm K, Anveden A, Peltonen M, Jacobson P, Romeo S, Svensson PA, S holm L, Carlsson LM.

**Decision rationale:** The request for bariatric surgery was denied on the basis that there were not any documented life-threatening co morbidities related to morbid obesity. With a BMI greater than 40, however, by accepted standards, such co morbidities are unnecessary. There must be documented weight loss failure and that happens to be the case per the requesting provider. In addition to being super obese; he is being treated for hypercholesterolemia, hypertension, and diabetes mellitus. Bariatric surgery is indicated for this 44 year old male. Studies have shown that successful weight loss at this weight would most likely fail long term. Therefore the request is not medically necessary.