

Case Number:	CM14-0074782		
Date Assigned:	07/16/2014	Date of Injury:	04/14/2006
Decision Date:	09/18/2014	UR Denial Date:	04/24/2014
Priority:	Standard	Application Received:	05/22/2014

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 and is licensed to practice in Nevada. 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 records, presented for review, indicate that this 52- year-old female was reportedly injured on April 14, 2006. The mechanism of injury was noted as falling off a step stool. The most recent progress note, dated March 21, 2014, was handwritten and difficult to read. Decreased irritable bowel syndrome issues were noted. It was stated that the injured employee no longer needs gastrointestinal medications. Prior notes, dated February 26, 2014, stated that the injured employee has low back pain and had gained weight going from 204 pounds to 262 pounds. No physical examination was performed. Diagnostic imaging studies were not reviewed during this visit. Previous treatment included an L3 through S1 lumbar fusion and subsequent removal of hardware as well as physical therapy. A request was made for a medically supervised weight loss program and was not certified in the preauthorization process on April 24, 2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Medically Supervised Weight Loss Program: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 1 Prevention. Decision based on Non-MTUS Citation <http://www.mdguidelines.com/obesity>.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Meta-analysis of the Efficacy of Weight Loss Programs, (Tsai and Wilson, 2005).

Decision rationale: Weight loss is a lifestyle issue that relates to calories consumed and calories expended. Counseling for diet and exercise as well as behavioral therapies are the mainstays of treatment of obesity. The injured employee should be monitored for several weeks for compliance and effectiveness of a self-motivated weight loss program however; weight loss is not necessarily a medical necessity.