

Case Number:	CM14-0190755		
Date Assigned:	11/24/2014	Date of Injury:	07/09/2011
Decision Date:	01/09/2015	UR Denial Date:	10/17/2014
Priority:	Standard	Application Received:	11/14/2014

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, has a subspecialty in Pain Medicine 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:

The injured worker is a 39-year-old female with an original date of injury of July 9, 2011. The mechanism of injury was a slip and fall. The patient has industrially related diagnoses of chronic pain, right knee osteoarthritis, and the patient underwent right knee arthroscopic surgery on November 30, 2011. Conservative treatments have included physical therapy, how again, and activity modification. The patient has had a bariatric consultation and was recommended to undergo a weight loss program. The disputed request is for a [REDACTED] program. A utilization review determination on October 17, 2014 had non certified this request. The rationale was that the patient was noted to have had previous participation in a weight loss program, and there was no noted documentation of the patient's progress. Additionally, there was no documentation of attempts at conventional weight loss such as diet and exercise.

IMR ISSUES, DECISIONS AND RATIONALES

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

[REDACTED] **Program:** Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 1 Prevention, Chapter 2 General Approach to Initial Assessment and Documentation. Decision based on Non-MTUS Citation Medical Disability Advisor by Presley Reed, MD, Obesity, <http://www.mdguidelines.com/obesity>

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: Systematic review: an evaluation of major commercial weight loss programs in the United States. (<http://www.ncbi.nlm.nih.gov/pubmed/15630109>)

Decision rationale: Regarding the request for a weight loss program, California Medical Treatment Utilization Schedule (MTUS) and Official Disability Guidelines (ODG) do not address the issue. A search of the National Library of identified an article entitled "Systematic review: an evaluation of major commercial weight loss programs in the United States." This article noted that, with the exception of 1 trial of [REDACTED], the evidence to support the use of the major commercial and self-help weight loss programs is suboptimal, and controlled trials are needed to assess the efficacy and cost-effectiveness of these interventions. Within the documentation available for review, the documentation does not clearly describe the patient's attempts at diet modification and a history of failure of reasonable weight loss measures such as dietary counseling, behavior modification, caloric restriction, and exercise within the patient's physical abilities. More importantly, the morbid obesity is not clearly established as part of the industrial claim in the submitted documentation. The IMR process does not evaluate causation or determine apportionment. If the requesting provider feels the issue of morbid obesity is industrially related, then an AME can first determine causation. In light of the above issues, the currently requested weight loss program is not medically necessary.