

<b>Case Number:</b>	CM15-0197476		
<b>Date Assigned:</b>	10/12/2015	<b>Date of Injury:</b>	10/07/2011
<b>Decision Date:</b>	11/30/2015	<b>UR Denial Date:</b>	09/22/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/07/2015

### 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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: Texas, Illinois

Certification(s)/Specialty: Preventive Medicine, Occupational Medicine

### 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 45 year old male, who sustained an industrial-work injury on 10-7-11. A review of the medical records indicates that the injured worker is undergoing treatment for status post revision lumbar decompression fusion with mature fusion, residual low back pain, and increased weight since surgery. Medical records dated (5-7-15 to 9-10-15) indicate that the injured worker complains of pain in the back that limits his activities and occasional right leg pain. The pain is rated 5-6 out of 10 on the pain scale, which has been unchanged. The pain is increased with activity, limits his activity and improved with rest. The physician indicates that prior to his back surgery the injured worker was at most 270 pounds and he currently weighs 325 pounds for a minimum weight gain of 55 pounds since the time of surgery. He previously had approval for [REDACTED] and tried it but was unable to tolerate the diet. The physician indicates that the injured worker has had a trial of independent weight loss that included dietary discipline and calorie restriction and has been unsuccessful. The physician indicates that he recommends a Consultation with certified Dietitian to determine whether or not he is a candidate for a supervised weight loss program. The physical exam dated 9-10-15 reveals that the injured worker is 5 feet 10 inches tall and weight is 325 pounds with body mass index (BMI) of 46.63 kg-m<sup>2</sup>. The lumbar exam reveals guarded range of motion and tenderness to palpation. Treatment to date has included pain medication including Cyclobenzaprine and Oxycodone, diagnostics, lumbar surgery 1-25-13, physical therapy at least 7 sessions, previous [REDACTED] diet program (unable to tolerate diet) and independent weight loss which was unsuccessful. The request for authorization date was 9-10-15 and requested service included Consultation with

certified Dietitian. The original Utilization review dated 9-22-15 non-certified the request for Consultation with certified Dietitian as not medically necessary.

### **IMR ISSUES, DECISIONS AND RATIONALES**

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

**Consultation with certified Dietitian:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Washington State Department of Labor and Industries, Medical Aid Rules & Fee Schedule Guidelines, Professional Services 7/1/2009.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation 1. 2013 AHA/ACC/TOS guideline for the management of overweight and obesity in adults: a report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines and The Obesity Society. National Guidelines Clearinghouse.

<http://www.guideline.gov/content.aspx?id=48339&search=commercial+weight+loss+program#Section420>>2. Tsai A G, Wadden T A. Systematic review: an evaluation of major commercial weight loss programs in the United States. *Annals of Internal Medicine* 2005; 142(1): 56-66. [PubMed <http://www.ncbi.nlm.nih.gov/pubmedhealth/PMH0021821/>].

**Decision rationale:** The injured worker sustained a work related injury on 10-7-11. The medical records provided indicate the diagnosis of status post revision lumbar decompression fusion with mature fusion, residual low back pain, and increased weight since surgery. The medical records provided for review do not indicate a medical necessity for Consultation with certified Dietitian. The MTUS is silent on weight loss program; however, The National Guidelines Clearinghouses states the American College of Cardiology/American Heart Association Task Force on Practice Guidelines and The Obesity Society recommend as follows: 1. Advise overweight and obese individuals who would benefit from weight loss to participate for 6 months in a comprehensive lifestyle program that assists participants in adhering to a lower-calorie diet and in increasing physical activity through the use of behavioral strategies. 2. Prescribe on-site, high-intensity (i.e., 14 sessions in 6 mo.) comprehensive weight loss interventions provided in individual or group sessions by a trained interventionist. 3. Prescribe commercial-based programs that provide a comprehensive lifestyle intervention as an option for weight loss, provided there is peer-reviewed published evidence of their safety and efficacy. 4. Advise overweight and obese individuals who have lost weight to participate long term (1 year) in a comprehensive weight loss maintenance program. In the article, Systematic review: an evaluation of major commercial weight loss programs in the United States, the authors concluded that the evidence to support the use of major commercial and self-help weight loss program is suboptimal. Therefore, while there is not much research supporting the benefit of weight loss program, the available research recommends that such programs should be comprehensive in nature, rather than limiting it to only one type of weight loss program. Besides, the [REDACTED] weight loss program has a dietary component, but the records indicate the injured worker did not benefit from this. The request is not medically necessary.