

Case Number:	CM15-0201571		
Date Assigned:	10/16/2015	Date of Injury:	05/14/2009
Decision Date:	12/02/2015	UR Denial Date:	09/24/2015
Priority:	Standard	Application Received:	10/14/2015

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, New York, California

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 applicant is a represented 39-year-old who has filed a claim for chronic low back pain (LBP) reportedly associated with an industrial injury of May 14, 2009. In a Utilization Review report dated September 24, 2015, the claims administrator failed to approve a request for Belviq. The claims administrator referenced a September 11, 2015 office visit and an associated September 16, 2015 RFA form in its determination. The applicant's attorney subsequently appealed. On said September 6, 2015 RFA form, weight loss program and Belviq were endorsed. On an associated progress note dated September 11, 2015, the applicant reported ongoing issues with low back pain radiating to the lower extremities. The note was very difficult to follow, handwritten, and not entirely legible. The applicant was on Motrin and tizanidine for pain relief, it was reported the applicant's work status was not detailed. The applicant exhibited a steady gait. The applicant's height, weight, and BMI were not reported on this date.

IMR ISSUES, DECISIONS AND RATIONALES

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

Belviq tab 10 mg Qty 60, take 1 tab 2 times daily: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines: Low Back - Aerobic exercise.

MAXIMUS guideline: Decision based on MTUS General Approaches 2004, Section(s): Initial Approaches to Treatment. Decision based on Non-MTUS Citation U.S. Food and Drug Administration; Indications and Usage; Belviq is a serotonin 2C receptor agonist indicated as an adjunct to a reduced-calorie diet and increased physical activity for chronic weight management in adults with an initial body mass index (BMI) of: 30 kg/m² or greater (obese) (1) or 27 kg/m² or greater (overweight) in the presence of at least one weight-related comorbid condition, (e.g., hypertension, dyslipidemia, type 2 diabetes) (1) Limitations of Use: The safety and efficacy of co-administration with other products for weight loss have not been established (1) The effect of Belviq on cardiovascular morbidity and mortality has not been established.

Decision rationale: No, the request for Belviq, a weight loss medication, was not medically necessary, medically appropriate, or indicated here. The MTUS Guidelines in ACOEM Chapter 3, page 47 stipulates that an attending provider incorporate some discussion of efficacy of medication for the particular condition for which it has been prescribed into his choice of recommendations so as to ensure progress and so as to manage expectations. Here, the attending provider's handwritten September 11, 2015 office visit did not clearly state whether the applicant had or not previously used Belviq and, if so, what response to the same was. While the Food and Drug Administration (FDA) notes that Belviq is indicated as an adjunct to diet and exercise for weight management purposes in applicants with a BMI greater than 30 or in applicants with BMI of greater than 27 with comorbidities such as hypertension, dyslipidemia, diabetes, here, however, the applicant's height, weight, BMI, medical history and/or presence or absence of comorbidities were not clearly discussed, described, or characterized on the handwritten September 11, 2015 office visit at issue. Therefore, the request was not medically necessary.