

Case Number:	CM14-0142183		
Date Assigned:	09/10/2014	Date of Injury:	06/02/2003
Decision Date:	10/14/2014	UR Denial Date:	08/04/2014
Priority:	Standard	Application Received:	09/02/2014

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 Occupational 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 applicant is represented [REDACTED] employee who has filed a claim for chronic low back reportedly associated with an industrial injury of June 2, 2003. Thus far, the applicant has been treated with the following: Analgesic medications; unspecified amounts of physical therapy; and earlier lumbar spine surgery. In a Utilization Review Report dated August 1, 2014, the claims administrator denied a request for a weight loss program. It was suggested that the applicant had BMI of 36. The claims administrator invoked non-MTUS Medical Disability Advisor (MDA) Guidelines to deny the request. The applicant's attorney subsequently appealed. In a supplemental report dated August 25, 2014, it was suggested that the applicant was alleging a variety of derivative issues such as xerostomia and bruxism, reportedly associated with an industrial injury. On August 19, 2014, the applicant reported persistent complaints of low back and leg pain. The applicant reported heightened complaints of pain and depression. The applicant apparently had poor hygiene and stated that he was unable to do any activities of daily living without medications. The applicant was on Protonix, Ambien, MiraLax, Cymbalta, Benicar, Colace, Lidoderm, Phenergan, Viagra, Senna, and Neurontin, it was stated. The applicant's BMI was 39, it was stated on this occasion. Gabapentin, Neurontin, Zipsor, Prilosec, and numerous other medications were renewed. It was stated that the applicant was considering a spinal cord stimulator. Genetic metabolism testing was recommended. On July 24, 2014, multiple medications were renewed, including OxyContin, Protonix, Zipsor, Neurontin, and Norco. The applicant's work status was not clearly stated, although it did not appear that the applicant was working. It was again stated that the applicant was spending his days in a chair and was not moving. The weight loss program at issue was apparently sought via a Request for Authorization Form dated July 28, 2014, the claims administrator suggested in its Utilization Review Report.

IMR ISSUES, DECISIONS AND RATIONALES

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

Weight Loss Program with [REDACTED]: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Weight Loss Programs.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 1 Prevention Page(s): 11.

Decision rationale: As noted in the MTUS-adopted ACOEM Guidelines in Chapter 1, page 11, strategies based on modification of applicant-specific risk factors, such as the weight loss program at issue, are "less certain, more difficult, and possibly less cost effective." The ACOEM position on weight loss programs, thus, is tepid-to-unfavorable. In this case, the attending provider did not proffer any compelling applicant-specific rationale or medical evidence which would augment the tepid-to-unfavorable ACOEM position on the article at issue. The information on file suggests that the applicant is immobile owing to issues with depression. It does not appear that the weight loss program alone would ameliorate the same. Therefore, the request is not medically necessary.