

Case Number:	CM15-0113094		
Date Assigned:	06/19/2015	Date of Injury:	08/20/2012
Decision Date:	07/30/2015	UR Denial Date:	06/05/2015
Priority:	Standard	Application Received:	06/11/2015

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: Arizona, California
 Certification(s)/Specialty: Family Practice

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 54 year old male, who sustained an industrial injury on August 20, 2012, incurring low back and knee injuries. He was diagnosed with lumbar disc disease with left leg sciatica, lumbar spine spondylosis, degenerative joint disease and osteoarthritis of the left knee. He underwent a surgical repair of the left knee in 2013. Treatment included physical therapy, muscle relaxants, proton pump inhibitor and pain medications, topical analgesic creams, epidural steroid injection and work restrictions. Lumbar Magnetic Resonance Imaging revealed disc bulging. Currently, the injured worker complained of depression, high blood pressure, memory loss and difficulty sleeping due to his disability and lack of income. He was diagnosed with major depression disorder and attention deficit hyperactivity disorder. The treatment plan that was requested for authorization included a retrospective body composition study.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective body composition study: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation American Obesity Association.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation NIH guidelines Nutr Res Pract. 2010 Apr; 4(2): 128-135. Published online 2010 Apr 28. doi: 10.4162/nrp.2010.4.2.128 PMID: PMC2867223 Comparisons of obesity assessments in over-weight elementary students using anthropometry, BIA, CT and DEXA.

Decision rationale: The ACOEM MTUS guidelines do not comment on body composition studies. BMI , although, not as accurate, is the standard method of assessing body composition. CT, MRI and DEXA are complicated and expensive methods of analyzing body fat, and require expert skills, so it is difficult to apply those methods to a wide range of people. However, their accuracy for assessing body composition has proven to be superior to the results of anthropometry. Overall, CT seems to be the best method used in body fat research with its ability to pin-point differences between visceral fat and subcutaneous fat in the abdominal region. In this case, the claimant was obese, but the need to analyze body composition was not justified. In addition, there was no mention of concern of osteoporosis stemming from the injury or intervention that would be based on the body analysis. The body composition analysis is not standard practice and is not medically necessary.