

Case Number:	CM13-0041426		
Date Assigned:	04/25/2014	Date of Injury:	11/30/2001
Decision Date:	12/31/2014	UR Denial Date:	09/27/2013
Priority:	Standard	Application Received:	10/15/2013

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 Internal Medicine, has a subspecialty in Nephrology 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:

This is a 53-year-old female with a November 30, 2001 date of injury. A progress report dated 9/11/13 noted subjective findings that the patient continues to use her CPAP machine at home and finds it helpful. It also noted that the patient believes she has maintained her weight, and has not had any significant weight changes; however, she wishes to restart Phentermine. The provider recommends that she may continue staying off this medication however the patient was insistent and wanted to see if she could lower her weight below 120 pounds. An 8/2/13 progress report noted that the patient had been experiencing excessive daytime somnolence. It is noted that the patient has not been under the care of a pulmonologist or other sleep specialist, and would benefit from having her machine interrogated, and from a dedicated mask fitting. Objective findings included a weight of 131 lbs. and a patient in no acute distress. Diagnostic Impression: sleep apnea, GERD, and depression. Treatment to date includes medication management and CPAP. A UR decision dated 9/27/13 denied the request for Phentermine 30 mg #30. There is no data to support the use of this medication for weight loss therapy. There is only a need for a physician supervised weight loss program, which combines diet and exercise. It also denied a sleep apnea specialist consult. This claimant does have sleep apnea, and is treated with CPAP.

IMR ISSUES, DECISIONS AND RATIONALES

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

Phentermine, 30mg 30 Tabs: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.drugs.com/phentermine.html>.

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: FDA (Phentermine)

Decision rationale: The California MTUS and Official Disability Guidelines do not address this issue. The FDA states that Phentermine hydrochloride tablets are indicated as a short-term (a few weeks) adjunct in a regimen of weight reduction based on exercise, behavioral modification and caloric restriction in the management of exogenous obesity for patients with an initial body mass index greater than or equal to 30 kg/m², or greater than or equal to 27 kg/m² in the presence of other risk factors (e.g., controlled hypertension, diabetes, hyperlipidemia). However, in the most recent progress note her weight is documented at 131 pounds. Though her height is not documented and therefore a body mass index not calculable, the provider recommends that the patient is able to stay off of the medication, as she has been able to keep her weight stable without this medication. Given her stable weight, it is unclear how Phentermine would be indicated at this time. Therefore, the request for Phentermine 30 mg 30 tabs is not medically necessary.

Sleep Apnea Specialist Consult: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM for Independent Medical Examinations and Consultations Regarding Referrals, Chapter 7, Page 127

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain Chapter - Office Visits and American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) Chapter 6, page 127, 156

Decision rationale: The California MTUS states that consultations are recommended, and a health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial factors are present or when the plan or course of care may benefit from additional expertise. The patient has a long-standing diagnosis of sleep apnea for which she uses CPAP. Although she notes some benefit from the continued use of CPAP, it is still noted that she suffers from excessive daytime somnolence such that it has caused work restrictions. It is noted that she has not been under the care of a pulmonologist or sleep specialist and therefore has not had her machine evaluated or her mask evaluated. Specialist consultation is warranted. Therefore, the request for sleep apnea specialist consult is medically necessary.