

Case Number:	CM14-0011483		
Date Assigned:	02/21/2014	Date of Injury:	10/16/2003
Decision Date:	06/25/2014	UR Denial Date:	01/09/2014
Priority:	Standard	Application Received:	01/28/2014

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 a represented [REDACTED] employee who has filed a claim for chronic low back pain, dyslipidemia, myofascial pain syndrome, obstructive sleep apnea, and depression reportedly associated with an industrial injury of October 16, 2003. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representations; transfer of care to and from various providers in various specialties; and opioid therapy. In a Utilization Review Report dated January 8, 2014, the claims administrator denied a request for phentermine, stating that the applicant had not tried and failed to lose weight of her own accord. The Physician's Desk Reference (PDR) was cited. The applicant's attorney subsequently appealed. In a progress note dated December 30, 2013, the applicant was described as reporting persistent complaints of knee and back pain. The applicant was reportedly complaining of weight gain issues. The applicant was reporting increased abdominal girth as well as heightened pain complaints. The applicant had a BMI of 28 based on a height of 5 feet 6 inches and weight of 178 pounds. The applicant exhibited an antalgic gait. The applicant's stated diagnoses were obstructive sleep apnea, myofascial pain syndrome, chronic low back pain, depression, and dyslipidemia. Percocet, Celebrex, Paxil, methadone, and Ativan were sought. A trial of phentermine was endorsed. It is incidentally noted that the claims administrator did not reference the cited guideline in its rationale.

IMR ISSUES, DECISIONS AND RATIONALES

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

PHENTERMINE TABLET 37.5MG DAY SUPPLY: 30 REFILLS: 0: Overturned

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Food and Drug Administration (Adipex/Phertermine Medication Guide). Page(s): 7-8.

Decision rationale: The MTUS does not specifically address the topic. However, pages 7 and 8 of the MTUS Chronic Pain Medical Treatment Guidelines state that prescribing provider should provide justification for usage of drugs for non-FDA labeled or non-FDA approved purposes. By implication, then, the MTUS does seemingly endorse FDA labelling. As noted by the Food and Drug Administration (FDA) Phentermine Medication Guide, Adipex or phentermine is a sympathomimetic intended as an adjunct for a few weeks to induce a program of weight reduction based on exercise, behavioral modification, and/or caloric restrictions in applicants with a BMI greater than 27 who have other risk factors. In this case, the applicant has a BMI of 28.7 and does have another risk factor in the form of obstructive sleep apnea and dyslipidemia. A trial of Adipex or phentermine tablet 37.5mg #30 is therefore medically necessary and appropriate.