

Case Number:	CM14-0135600		
Date Assigned:	08/29/2014	Date of Injury:	01/12/1996
Decision Date:	10/17/2014	UR Denial Date:	08/06/2014
Priority:	Standard	Application Received:	08/22/2014

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:

This is a 53-year-old male with a 1/12/96 date of injury. The mechanism of injury was the result of repeated exposure to chemicals. According to a progress note dated 5/1/14, the patient had gained a significant amount of weight. He was eating more due to many stressful issues at home. Objective findings: morbidly obese body habitus, no acute distress, no abnormal findings. Diagnostic impression: morbid obesity, depression, hypertension, bone disorder, sleep apnea, shortness of breath, beryllium exposure. Treatment to date: medication management. A UR decision dated 8/6/14 denied the request for folic acid. During a peer-to-peer discussion, the provider said that this was prescribed in the past because the patient was taking methotrexate. He is not currently taking methotrexate and he is not sure if he needs folic acid at this time.

IMR ISSUES, DECISIONS AND RATIONALES

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

Folic acid: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Stress & Mental Illness Chapter Folate (for depressive disorders)

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 (Folic Acid)

Decision rationale: CA MTUS does not address this issue. The FDA states that Folic Acid, USP is effective in the treatment of megaloblastic anemias due to a deficiency of Folic Acid (as may be seen in tropical or nontropical sprue) and in anemias of nutritional origin, pregnancy, infancy, or childhood. Folic acid is sometimes used in combination with other medications to treat pernicious anemia. However it will not treat Vitamin B12 deficiency and will not prevent possible damage to the spinal cord. Folic acid is often taken with Methotrexate to reduce the risk of side effects including nausea, mouth ulcers, blood problems, liver cirrhosis, and hair loss. According to the UR decision dated 8/6/14 during a peer-to-peer discussion, the provider said that this was prescribed in the past because the patient was taking methotrexate. However, he is not currently taking methotrexate and he is not sure if he needs folic acid at this time. There is no documentation that the patient is suffering from a folic-acid deficiency at this time. A specific rationale identifying why the patient requires folic acid at this time was not provided. Therefore, the request for Folic Acid was not medically necessary.