

Case Number:	CM14-0028452		
Date Assigned:	06/20/2014	Date of Injury:	09/23/1998
Decision Date:	11/25/2014	UR Denial Date:	02/26/2014
Priority:	Standard	Application Received:	03/06/2014

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:

Patient is a 68 year-old male with date of injury 09/23/1998. The medical document associated with the request for authorization, a comprehensive medical-legal evaluation report, dated 01/09/2014, lists subjective complaints as hearing loss, noise in the ears, and dizziness. Patient reports constant ringing in both ears since 1998. Objective findings: Examination of bilateral ears revealed no evidence of pathology or deformity. Ear canal was clear of any wax, foreign material, or infection. Tympanic membrane was intact and translucent without any signs of inflammation or perforation. Usual anatomical landmarks were easily identified, and no physical abnormalities were seen. No mastoid tenderness was elicited. A tinnitus test match was performed and confirmed patient has ringing in his ears. Patient's hearing loss impairment calculation was 0%. Diagnosis: 1.Bilateral high-tone hearing nerve loss, secondary to industrial noise exposure 2.Slight to moderate tinnitus, secondary to industrial noise exposure 3.Mild to slight vertigo, cause not determined 4.Deviated nasal septum, incidental finding. The medical records supplied for review document that the patient had not been prescribed the following medication before the request for authorization on 01/09/2014. Medications: Lipo-Flavonoids SIG: three tablets a day.

IMR ISSUES, DECISIONS AND RATIONALES

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

Lipo-Flavonoids: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines Pain Procedure Summary last updated on 01/07/2014

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain (Chronic), Medical Food.

Decision rationale: Lipo-flavonoid Plus is a supplement promoted for ringing in the ears (tinnitus) and other ear-related conditions including vertigo, ear aches, ear infection, and Meniere's disease and is considered a medical food, not a medication. Medical food is defined in section 5(b) of the Orphan Drug Act (21 U.s.c.360ee (b) (3)) as "a food which is formulated to be consumed or administered internally under the supervision of a physician and which is intended for the specific dietary management of a disease or condition for which distinctive nutritional requirements, based on recognized scientific principles, are established by medical evaluation. Medical foods do not have to be registered with the FDA and as such are not typically subject to the rigorous scrutiny necessary to allow recommendation by evidence-based guidelines. Lipo-Flavonoids are not medically necessary