

Case Number:	CM14-0032917		
Date Assigned:	06/20/2014	Date of Injury:	10/09/2003
Decision Date:	07/21/2014	UR Denial Date:	02/13/2014
Priority:	Standard	Application Received:	03/14/2014

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 Anesthesiology, has a subspecialty in Pain Management 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 patient is a male with the date of injury of October 9, 2003. A Progress Report dated January 7, 2014 identifies Subjective findings of continues on continuous ambulatory peritoneal dialysis. He notes his appetite has been so, so. He notes there has been a lot more stress in his life. Physical Exam identifies abdomen is distended. Laboratory Data identifies hemoglobin 14.6. Impression identifies 61-year-old gentleman on peritoneal dialysis. Plan identifies continue the current prescription.

IMR ISSUES, DECISIONS AND RATIONALES

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

Epogen: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Physicians Desk Reference.

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: <http://www.drugs.com/epogen.html>.

Decision rationale: Regarding the request for Epogen, California MTUS and ODG do not address the issue. The FDA notes that Epogen is used to treat anemia in patients with chronic kidney disease. Epogen is also used in HIV patients who have anemia due to treatment with

zidovudine and in cancer patients who have anemia due to chemotherapy. Within the documentation available for review, the patient is noted to have reported hemoglobin of 14.6, which is not consistent with anemia. In light of this issue, the request for Epogen is not medically necessary and appropriate.