

Case Number:	CM14-0059968		
Date Assigned:	07/09/2014	Date of Injury:	07/28/2009
Decision Date:	08/29/2014	UR Denial Date:	04/28/2014
Priority:	Standard	Application Received:	04/30/2014

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 Illinois. 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 48-year-old male delivery driver who felt a pain in his lower back on July 28, 2009 and was diagnosed with a low back strain. He had lumbar fusion, attended about half of his physical therapy sessions, and was treated with a back brace and Fentanyl for ongoing pain. He had signed an opiate agreement and his urine toxicology screens were appropriate. He was weaned off opioid medications and was going to a gym for exercises. He has a history of alcoholism and illicit drug abuse and is an active member of [REDACTED] and [REDACTED]. He has been receiving regular psychiatric counseling. He takes Pristiq, Latuda, Trazodone for insomnia, Cialis for erectile dysfunction, and Klonopin for anxiety and panic attacks. The request is for authorization of Klonopin and Cialis.

IMR ISSUES, DECISIONS AND RATIONALES

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

Klonopin 0.5mg: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Benzodiazepines (Anti-Depressant) Page(s): 24, 66.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Benzodiazepines Page(s): 24.

Decision rationale: This injured worker should first be tried on an anti-depressant for his anxiety, since it is expected that chronic anxiety requires long term treatment and benzodiazepines are not recommended for long-term use because long-term efficacy is unproven and there is a risk of dependence. Additionally, this injured worker may be at higher risk for dependence given his history of alcohol dependence and narcotic use. Most guidelines limit use to 4 weeks. Their range of action includes use as a sedative/hypnotic, anxiolytic, anticonvulsant, and muscle relaxant. Chronic benzodiazepines are the treatment of choice in very few conditions. Tolerance to hypnotic effects develops rapidly. Tolerance to anxiolytic effects occurs within months and long-term use may actually increase anxiety. Therefore the requested Klonopin 0.5mg is not medically necessary.

Cialis 20 mg: Upheld

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Erectile dysfunction and the drugs to treat it. In many cases, medications are all a man needs to stay sexually active. Harv Health Lett. 2014 May;39(7):7. Loakeimidis N, Vlachopoulos C. Microvascular function and incident erectile dysfunction: a new perspective for their relationship. Coron Artery Dis. 2014 Aug 20.

Decision rationale: There is no mention of erectile dysfunction as an effect of this worker's injury since his injury is limited to musculoskeletal dysfunction, and Cialis is a drug used singularly for erectile dysfunction. It is a phosphodiesterase inhibitor that enables penile erection and is not approved for chronic pain. Therefore Cialis 20 mg is not medically necessary.