

Case Number:	CM14-0078121		
Date Assigned:	07/18/2014	Date of Injury:	07/07/2005
Decision Date:	08/25/2014	UR Denial Date:	05/05/2014
Priority:	Standard	Application Received:	05/28/2014

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 Physical Medicine and Rehabilitation 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:

According to the records made available for review, this is a 60-year-old female with a 7/7/05 date of injury. At the time (4/25/14) of request for authorization for Phentermine 37.5mg/tab; 1 tablet once-twice daily po (by mouth) #60 and Nucynta 50mg/tablet; 1 tablet 1-2 tablets po (by mouth) every 4 hours prn (as needed) for pain #150, there is documentation of subjective (pain that is 6/10 with medications and 9.5/10 without) and objective (decreased sensation in the lateral feet and legs) findings, current diagnoses (herniated lumbar disc and lumbar radiculitis), and treatment to date (medications (specific medications not specified)). Medical report identifies that the patient is receiving adequate pain relief with medications. Regarding Phentermine, there is no documentation of Phentermine used as adjunct in a regimen of weight reduction based on exercise, behavioral modification, and caloric restriction in the management of exogenous obesity for patients with an initial body mass index 30 kg/m², or 27 kg/m² in the presence of other risk factors (controlled hypertension, diabetes, hyperlipidemia), and the intention to treat over a short-term (a few weeks). Regarding Nucynta, there is no documentation that the prescriptions are from a single practitioner and are taken as directed; the lowest possible dose is being prescribed; and there will be ongoing review and documentation of pain relief, functional status, appropriate medication use, and side effects; and Nucynta used as a second line therapy and development intolerable adverse effects with first line opioids.

IMR ISSUES, DECISIONS AND RATIONALES

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

Phentermine 37.5mg/tab; 1 tablet once-twice daily po (by mouth) #60: Upheld

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

<https://www.ncbi.nlm.nih.gov/pubmedhealth/PMHT0011706/?report=details>.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS.

Decision based on Non-MTUS Citation <http://www.drugs.com/pro/phentermine.html>.

Decision rationale: The MTUS and ODG do not address the issue. Medical Treatment Guideline identifies documentation of Phentermine used as adjunct in a regimen of weight reduction based on exercise, behavioral modification, and caloric restriction in the management of exogenous obesity for patients with an initial body mass index ≥ 30 kg/m², or ≥ 27 kg/m² in the presence of other risk factors (e.g., controlled hypertension, diabetes, hyperlipidemia), as criteria necessary to support the medical necessity of short-term (a few weeks) course of Phentermine. Within the medical information available for review, there is documentation of diagnoses of herniated lumbar disc and lumbar radiculitis. However, there is no documentation of Phentermine used as adjunct in a regimen of weight reduction based on exercise, behavioral modification, and caloric restriction in the management of exogenous obesity for patients with an initial body mass index ≥ 30 kg/m², or a ≥ 27 kg/m² in the presence of other risk factors (controlled hypertension, diabetes, hyperlipidemia), and the intention to treat over a short-term (a few weeks). Therefore, based on guidelines and a review of the evidence, the request for Phentermine 37.5mg/tab; 1 tablet once-twice daily po (by mouth) #60 is not medically necessary.

Nucynta 50mg/tablet; 1 tablet 1-2 tablets po (by mouth) every 4 hours prn (as needed) for pain #150: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 78-80.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 74-80. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain, Tapentadol (Nucynta).

Decision rationale: The MTUS and ODG do not address the issue. Medical Treatment Guideline identifies documentation of Phentermine used as adjunct in a regimen of weight reduction based on exercise, behavioral modification, and caloric restriction in the management of exogenous obesity for patients with an initial body mass index ≥ 30 kg/m², or ≥ 27 kg/m² in the presence of other risk factors (e.g., controlled hypertension, diabetes, hyperlipidemia), as criteria necessary to support the medical necessity of short-term (a few weeks) course of Phentermine. Within the medical information available for review, there is documentation of diagnoses of herniated lumbar disc and lumbar radiculitis. However, there is no documentation of Phentermine used as adjunct in a regimen of weight reduction based on exercise, behavioral modification, and caloric restriction in the management of exogenous obesity for patients with an initial body mass index ≥ 30 kg/m², or a ≥ 27 kg/m² in the presence of other risk factors (controlled hypertension, diabetes, hyperlipidemia), and the intention to treat over a short-term (a few

weeks). Therefore, based on guidelines and a review of the evidence, the request for Phentermine 37.5mg/tab; 1 tablet once-twice daily po (by mouth) #60 is not medically necessary.