

Case Number:	CM15-0141636		
Date Assigned:	07/31/2015	Date of Injury:	02/05/2008
Decision Date:	08/28/2015	UR Denial Date:	06/18/2015
Priority:	Standard	Application Received:	07/21/2015

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:
State(s) of Licensure: California, Indiana, New York
Certification(s)/Specialty: Internal Medicine

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 66 year old male sustained an industrial injury on 2-5-08. The injured worker was receiving ongoing treatment for hypertension. In a PR-2 dated 1-20-15, the injured worker's blood pressure was 180 over 80. The treatment plan included discontinuing smoking and rechecking blood pressure. In a PR-2 dated 3-18-15, the injured worker's blood pressure was still elevated at 175 over 86. In a PR-2 dated 4-15-15, the injured worker denied chest pain. Blood pressure was 130 over 80. No additional objective findings were documented. Current medications included Lisinopril, Nifedipine, ASA, Amitiza and Miralax. Current diagnoses included hypertension and constipation. The treatment plan included continuing prior program with medications (Lisinopril, Nifedipine, ASA, Amitiza and Miralax).

IMR ISSUES, DECISIONS AND RATIONALES

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

Nifedipine 90mg #100 with 3 refills: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation National Clinical Guideline Centre. Management of stable angina. London (UK): National Institute for Health and Clinical Excellence (NICE); 2011 Jul 34 p. (clinical guideline; no. 126).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation <https://www.nlm.nih.gov/medlineplus/druginfo/meds/a684028.html>.

Decision rationale: Pursuant to Medline plus, Nifedipine 90 mg #100 with three refills is not medically necessary. Nifedipine is used to treat high blood pressure and to control angina (chest pain). Nifedipine is in a class of medications called calcium-channel blockers. It lowers blood pressure by relaxing the blood vessels so the heart does not have to pump as hard. It controls chest pain by increasing the supply of blood and oxygen to the heart. High blood pressure is a common condition and when not treated, can cause damage to the brain, heart, blood vessels, kidneys and other parts of the body. Damage to these organs may cause heart disease, a heart attack, heart failure, stroke, kidney failure, loss of vision, and other problems. In addition to taking medication, making lifestyle changes will also help to control your blood pressure. These changes include eating a diet that is low in fat and salt, maintaining a healthy weight, exercising at least 30 minutes most days, not smoking, and using alcohol in moderation. In this case, the injured worker's working diagnoses are hypertension and constipation. The date of injury is February 8, 2008. Request for authorization is June 15, 2015. Documentation from a December 8, 2014 progress note shows the injured worker was being treated for hypertension (blood pressure 160/86) with Lisinopril and nifedipine. The treatment plan was to increase nifedipine to 90 mg one tablet in the morning and one half tablets in the evening. According to a December 23, 2014 progress note blood pressure was 150/80 and the treatment plan was to "continue same medication". According to April 15, 2015 progress note, there were no new subjective complaints. Blood pressure was 130/80 and the treatment plan states continue prior medications. According to a May 27, 2015 progress note, subjectively the injured worker has continued complaints of rectal pain and discharge. Blood pressure is 142/92. The treating provider is requesting an excessive number of nifedipine 90 mg tablets. The injured worker takes nifedipine one daily. The treating provider requested a one-year supply by ordering nifedipine 90 mg one daily #100 (three month supply) with three refills. The injured worker needs periodic follow-up (every three months) for reevaluation of hypertension. Additionally, the injured worker is taking Lisinopril. Consequently, absent compelling clinical documentation for a one year supply of nifedipine 90 mg without periodic follow-up, Nifedipine 90 mg #100 with three refills is not medically necessary.

Miralax #1 bottle: 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 <https://www.nlm.nih.gov/medlineplus/druginfo/meds/a603032.html>.

Decision rationale: Pursuant to Medline plus, Miralax one bottle is not medically necessary. Polyethylene glycol 3350 is used to treat occasional constipation. Polyethylene glycol 3350 is in a class of medications called osmotic laxatives. It works by causing water to be retained with

the stool. This increases the number of bowel movements and softens the stool so it is easier to pass. In this case, the injured worker's working diagnoses are hypertension and constipation. The date of injury is February 8, 2008. Request for authorization is June 15, 2015. Documentation from a December 8, 2014 progress note shows the injured worker was being treated for hypertension (blood pressure 160/86) with Lisinopril and nifedipine. The treatment plan was to increase nifedipine to 90 mg one tablet in the morning and one half tablets in the evening. Additional medications include Amitiza and Miralax. Amitiza is used to treat chronic constipation or constipation caused by opiate pain medications. Amitiza increases the secretion of fluid in the intestines to make it easier to pass stools. There is no documentation demonstrating objective functional improvement with Amitiza. There is no clinical rationale for the concurrent use of Miralax and Amitiza. The start date for Miralax is unspecified. There is no documentation demonstrating objective functional improvement with Miralax. Consequently, absent clinical documentation demonstrating objective functional improvement with ongoing Miralax, Miralax one bottle is not medically necessary.