

<b>Case Number:</b>	CM15-0166345		
<b>Date Assigned:</b>	09/04/2015	<b>Date of Injury:</b>	08/07/2012
<b>Decision Date:</b>	10/09/2015	<b>UR Denial Date:</b>	07/27/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/24/2015

### 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: Texas, New York, California  
 Certification(s)/Specialty: Preventive Medicine, Occupational 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:

The applicant is a represented 65-year-old who has filed a claim for chronic low back pain (LBP) reportedly associated with an industrial injury of August 7, 2012. In a Utilization Review report dated July 25, 2015, the claims administrator failed to approve a request for Livalo (Pitavastatin). The claims administrator did, however, approve requests for Diovan, Xarelto, and Flecaine. The claims administrator referenced a June 4, 2015 date of service and an associated RFA form of July 20, 2015 in its determination. The applicant's attorney subsequently appealed. On an RFA form dated May 26, 2015, Livalo, Diovan, Xarelto, Flecaine, and Sentra were endorsed for stated diagnoses of hypertension, arrhythmia, and chest pain. There was no mention of the applicant is having issues with dyslipidemia either on said RFA form or on an associated progress note of the same date. On April 21, 2015, Diovan, Xarelto, Flecaine, laboratory testing, Livalo, and Sentra were again endorsed. An associated progress note of April 21, 2015 seemingly did not make any mention of the medication efficacy. On June 4, 2015, Flecaine, Xarelto, Diovan, and Livalo were all again renewed, once again without any discussion of medication efficacy. The applicant was given diagnosis of hypertension, history of arrhythmia, and chest pain. There was, once again, no mention of the applicant's having issues with dyslipidemia on this date.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Livalo 2 MG Qty 30:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009.

**MAXIMUS guideline:** Decision based on MTUS General Approaches 2004, Section(s): Initial Approaches to Treatment. Decision based on Non-MTUS Citation Food and Drug Administration LIVALO is a HMG-CoA reductase inhibitor indicated for: Patients with primary hyperlipidemia and mixed dyslipidemia as an adjunctive therapy to diet to reduce elevated total cholesterol (TC), low-density lipoprotein cholesterol (LDL-C), apolipoprotein B (Apo B), triglycerides (TG), and to increase high-density lipoprotein cholesterol (HDL-C) (1.1).

**Decision rationale:** No, the request for Livalo, a cholesterol-lowering medication, was not medically necessary, medically appropriate, or indicated here. The MTUS Guideline in ACOEM Chapter 3, page 47 stipulates that an attending provider incorporate some discussion of efficacy of medication for the particular condition for which it has been prescribed into his choice of recommendations to ensure proper usage and to manage expectations. Here, however, multiple progress notes, referenced above, including the June 4, 2015 progress note at issue, failed to incorporate any discussion of medication efficacy. It was not clearly stated for what issue, condition, and/or diagnosis Livalo had been prescribed for and/or whether or not ongoing usage of Livalo had or had not proven beneficial in ameliorating the same. While the Food and Drug Administration (FDA) notes that Livalo is indicated in the treatment of primary-dyslipidemia or mixed dyslipidemia, again, the June 4, 2015 progress note at issue made no mention of the applicant's carrying a diagnosis of dyslipidemia for which ongoing use of Livalo would have been indicated. Therefore, the request was not medically necessary.