

<b>Case Number:</b>	CM15-0166506		
<b>Date Assigned:</b>	09/04/2015	<b>Date of Injury:</b>	05/13/2013
<b>Decision Date:</b>	10/13/2015	<b>UR Denial Date:</b>	07/30/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/25/2015

### 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 58-year-old who has filed a claim for neck, low back, mid back, and shoulder pain reportedly associated with an industrial injury of May 13, 2013. In a Utilization Review report dated July 30, 2015, the claims administrator failed to approve a request for Ambien (zolpidem). The claims administrator referenced an RFA form received on July 22, 2015 in its determination. The applicant's attorney subsequently appealed. On July 25, 2015, Norco, Protonix, and Tramadol were endorsed. The applicant was given a Toradol injection. Multifocal complaints of neck, mid back, low back, and shoulder pain were reported. The applicant was seemingly kept off of work. Topical compounds were endorsed. In an RFA form dated July 1, 2015, Ambien was seemingly renewed without much in the way of supporting rationale or supporting commentary. The attending provider did submit a templated letter dated July 1, 2015 stating that the applicant's conditions would deteriorate if her medications were not furnished. In an earlier note dated April 8, 2015, Zolpidem (Ambien) was renewed with a similar accompanying letter.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Zopidem 10mg #30:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain Chapter (04/30/2015).

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Introduction. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Mental Illness & Stress, Zolpidem (Ambien) and Other Medical Treatment Guidelines Food and Drug Administration (FDA)NDA 19908 S027 FDA approved labeling 4.23.08Ambien is indicated for the short-term treatment of insomnia characterized by difficulties with sleep initiation. Ambien has been shown to decrease sleep latency for up to 35 days in controlled clinical studies.

**Decision rationale:** No, the request for zolpidem (Ambien), a sleep aid, was not medically necessary, medically appropriate, or indicated here. Pages 7 and 8 of the MTUS Chronic Pain Medical Treatment Guideline stipulates that an attending provider using a drug for non-FDA labeled purposes has a responsibility to be well informed regarding usage of the same. The Food and Drug Administration (FDA) notes, however, that Ambien is indicated in the short-term treatment of insomnia, for up to 35 days. In a similar vein, ODG's Mental Illness and Stress Chapter Zolpidem topic also notes that Ambien is not recommended for a long-term use purposes, but rather, should be reserved for short-term use purposes. The renewal request for Zolpidem, thus, was at odds with both FDA and ODG principles and parameters. Therefore, the request is not medically necessary.