

<b>Case Number:</b>	CM15-0193863		
<b>Date Assigned:</b>	10/07/2015	<b>Date of Injury:</b>	03/17/1998
<b>Decision Date:</b>	11/24/2015	<b>UR Denial Date:</b>	09/11/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/02/2015

### 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 56-year-old who has filed a claim for chronic neck, wrist, and low back pain (LBP) reportedly associated with an industrial injury of March 17, 1998. In a utilization review report dated September 11, 2015, the claims administrator failed to approve a request for Protonix while apparently approving Celebrex. The claims administrator acknowledged that the applicant was using Celebrex in conjunction with aspirin but apparently denied the request, suggesting the applicant employ over-the-counter proton pump inhibitors. An August 31, 2015 office visit was cited. On July 28, 2015, the applicant was described as using Celebrex, senna, Protonix, Cymbalta, Lunesta, MiraLAX, Voltaren Gel, Duragesic, aspirin, Flexeril, Inderal, ramipril, metformin, Lipitor, vitamin D, doxepin, Lexapro, Xanax, Plaquenil, hydrochlorothiazide, Bumex, and Reglan, it was reported.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Protonix Dr 40mg #30 refill: 2:** Overturned

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): NSAIDs, GI symptoms & cardiovascular risk.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): NSAIDs, GI symptoms & cardiovascular risk. Decision based on Non-MTUS Citation ACOEM Occupational Medicine Practice Guidelines, 3rd ed., Shoulder Disorders, pg. 70.

**Decision rationale:** Yes, the request for Protonix, a proton pump inhibitor, was medically necessary, medically appropriate, and indicated here. Page 68 of the MTUS Chronic Pain Medical Treatment Guidelines notes that applicants who are at heightened risk for development of adverse gastrointestinal events to include the applicants who are concurrently using an NSAID and aspirin. Here, the applicant was described on July 28, 2015 as using Celebrex, an NSAID medication, with aspirin. The applicant was, thus, at heightened risk for development of adverse gastrointestinal events and did, per page 68 of the MTUS Chronic Pain Medical Treatment Guidelines, qualify for prophylactic usage of Protonix, a proton pump inhibitor, for cytoprotective effect. The Third Edition ACOEM Guidelines Shoulder Disorders Chapter also notes that diabetic applicants are at heightened risk for gastrointestinal bleeding and should receive cytoprotective medications in conjunction with NSAIDs. Here, the applicant was diabetic, it was reported on July 28, 2015. Usage of Protonix for cytoprotective purposes was, thus, indicated in the clinical context present here, per page 68 of the MTUS Chronic Pain Medical Treatment Guidelines and page 70 of the Third Edition ACOEM Guidelines Shoulder Disorders Chapter. Therefore, the request was medically necessary.