

<b>Case Number:</b>	CM15-0196467		
<b>Date Assigned:</b>	10/12/2015	<b>Date of Injury:</b>	12/27/2007
<b>Decision Date:</b>	11/30/2015	<b>UR Denial Date:</b>	09/29/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/06/2015

### 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 34-year-old who has filed a claim for chronic low back pain (LBP) reportedly associated with an industrial injury of December 27, 2007. In a Utilization Review report dated September 29, 2015, the claims administrator failed to approve a request for omeprazole. The claims administrator referenced a September 8, 2015 office visit in its determination. The applicant's attorney subsequently appealed. On said September 8, 2015 office visit, the applicant reported ongoing complaints of low back pain radiating to lower extremities. The applicant was on Neurontin, Norco, Norflex, Pamelor, and Prilosec, the treating provider reported. Several of the same were refilled. It was stated that Prilosec was being employed for cytoprotective effect (as opposed to for actual symptoms of reflux). It was suggested that the applicant was no longer using naproxen, an anti-inflammatory medication, per her nephrologist. The applicant was 34 years old, it was reported on this date.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**One (1) prescription of Omeprazole 20mg #60: Upheld**

**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 rationale:** No, the request for omeprazole (Prilosec), a proton pump inhibitor, was not medically necessary, medically appropriate, or indicated here. The attending provider's September 8, 2015 progress note suggested that Prilosec (omeprazole) was being employed for cytoprotective effect (as opposed to for actual symptoms of reflux). However, the applicant seemingly failed to meet criteria set forth on page 68 of the MTUS Chronic Pain Medical Treatment Guidelines for usage of omeprazole for cytoprotective effect, which included evidence that an applicant is using multiple NSAIDs concurrently, evidence that an applicant is using NSAIDs in conjunction with corticosteroids, and/or evidence that an applicant has a history of peptic ulcer disease, GI bleeding, or the like. Here, however, the applicant was 34 years old, it was reported on September 8, 2015. The applicant was no longer using naproxen, an anti-inflammatory medication, owing to reported renal issues present at that point in time. There was no mention of the applicant's having a history of previous peptic ulcer disease or GI bleeding. It did not appear, thus, that the applicant was an appropriate candidate for usage of omeprazole for cytoprotective effect purposes. Therefore, the request was not medically necessary.