

Case Number:	CM15-0206251		
Date Assigned:	10/23/2015	Date of Injury:	08/03/2010
Decision Date:	12/09/2015	UR Denial Date:	10/13/2015
Priority:	Standard	Application Received:	10/20/2015

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 64-year-old who has filed a claim for chronic shoulder and neck pain reportedly associated with an industrial injury of August 3, 2010. In a Utilization Review report dated October 30, 2015, the claims administrator failed to approve a request for Duexis. The claims administrator referenced an October 7, 2015 office visit in its determination. The applicant's attorney subsequently appealed. On said October 7, 2015 office visit, the applicant was reportedly off of work, the treating provider reported. The applicant was on tramadol, Duexis and Vicodin, the treating provider reported. The attending provider contended that the applicant would be unable to do laundry, cooking, or sweeping in unspecified amounts without her medications. The applicant had developed dyspepsia with oral Motrin, the treating provider reported and had therefore begun Duexis, the treating provider suggested. Duexis, tramadol, and Norco were all ultimately renewed, as were the applicant's permanent work restrictions. The attending provider acknowledged that the applicant was not working with said limitations in place.

IMR ISSUES, DECISIONS AND RATIONALES

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

Ibuprofen-famotidine (Duexis) 800-26.6mg, #60 with 2 refills: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG).

MAXIMUS guideline: Decision based on MTUS General Approaches 2004, Section(s): Initial Approaches to Treatment, and Chronic Pain Medical Treatment 2009, Section(s): Introduction, NSAIDs, GI symptoms & cardiovascular risk. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain (Chronic), Duexis® (ibuprofen & famotidine).

Decision rationale: No, the request for Duexis, an amalgam of ibuprofen and famotidine, was not medically necessary, medically appropriate, or indicated here. While page 69 of the MTUS Chronic Pain Medical Treatment Guidelines does acknowledge that H2 antagonists such as famotidine, i.e., one of the components in the Duexis amalgam, are indicated in the treatment of NSAID-induced dyspepsia, as is reportedly here, this recommendation is, however, qualified by commentary made on page 7 of the MTUS Chronic Pain Medical Treatment Guidelines and on page 47 of the ACOEM Practice Guidelines to the effect that an incorporate some discussion of cost into his choice of recommendations. Here, however, the attending provider failed to state why brand-name Duexis was furnished in favor of separate prescription for generic ibuprofen and/or generic famotidine. In a similar vein, ODGs Chronic Pain Chapter Duexis topic also notes that Duexis is not recommended as a first-line agent, particularly in light of the fact that Motrin and Pepcid are also available at multiple strengths over-the-counter. It did not appear, moreover, that ongoing usage of Duexis had proven particularly beneficial here. The applicant remained off of work, the treating provider reported on October 7, 2015. Ongoing usage of Duexis failed to curtail the applicant's dependence on opioid agents such as tramadol and Norco. Permanent work restrictions were renewed, unchanged from previous visit, on that date, effectively resulting in the applicant's removal from the workforce. All of the foregoing, taken together, suggested a lack of functional improvement as defined in MTUS 9792.20e, despite ongoing usage of the same. Therefore, the request was not medically necessary.