

Case Number:	CM15-0212511		
Date Assigned:	11/02/2015	Date of Injury:	02/07/2007
Decision Date:	12/14/2015	UR Denial Date:	09/18/2015
Priority:	Standard	Application Received:	10/28/2015

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: Illinois
 Certification(s)/Specialty: Ophthalmology

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 injured worker is a 57 year old male, who sustained an industrial injury on 2-7-07. The injured worker was diagnosed as having treated retinal detachment OD with PVR fibrosis; phthisis OD; Uveitis. Treatment to date has included medications. Currently, the PR-2 notes dated 7-23-15 indicated the injured worker was in the office for dilated retina examination for a history of phthisis OD, 3 month office visit follow-up. He has no pain and is stable using the medication drops for a history of ocular trauma. He has retinal surgery for which he will for his lifetime need to use the Durezol ophthalmic drops 6 times a day in his right eye. A visual acuity examination, Slit Lamp and external examination of the right eye took place on this date and the provider notes "normal appearing iris with no signs of neovascularization, atrophy or synechia, angles appear open and AC IOL. A normal appearing optic nerve with healthy pink rim and normal appearing nerve fiber layer, Cup discs vertical 0.30, normal color and contour for age, vessels are of normal caliber without arteriovenous nicking or significant tortuosity, treated retinal detachment with PVR fibrosis, chorioretinal scar, vitreous normal and clear for age, no PVD." The provider has requested Durezol Ophthalmic Drop with 9 refills and for the injured worker to return in 3 months for office visit and re-examination. A Request for Authorization is dated 10-5-15. A Utilization Review letter is dated 9-18-15 and modified the certification for Durezol Ophthalmic Drop with 9 refills to allow for 3 refills only. A request for authorization has been received for Durezol Ophthalmic Drop with 9 refills.

IMR ISSUES, DECISIONS AND RATIONALES

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

Durezol Ophthalmic Drop with 9 refills: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation www.drugs.com/pro/durezol.html.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American Academy of Ophthalmology Preferred Practice Pattern.

Decision rationale: This is a pt with chronic hypotony and inflammation who is using Durezol 6x/day. The question is whether the patient should get 9 refills or 3 refills of this drop which in effect is asking how often does this patient need to be seen. Given the patient's condition, they should typically be seen every 3-4 months, therefore it is not necessary to have 9 refills of the drop since they can be seen sooner and get additional refills.