

Case Number:	CM15-0041219		
Date Assigned:	03/11/2015	Date of Injury:	11/27/2006
Decision Date:	04/21/2015	UR Denial Date:	02/02/2015
Priority:	Standard	Application Received:	03/04/2015

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: New Jersey, Michigan, California
 Certification(s)/Specialty: Neurology, Neuromuscular 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 injured worker is a 60-year-old female, who sustained a work related injury on 11/27/06. She slipped and fell. The diagnoses have included none related to weight problem. Treatment to date has included the medication of Megace. In the follow-up note dated 12/11/14, the injured worker complains she is losing weight. The treatment plan is to request authorization for a refill of Megace. Since she is having trouble maintaining her weight, this medication will help with her appetite.

IMR ISSUES, DECISIONS AND RATIONALES

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

Megace 400 mg/10 ml, 600 ml: 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), a well as the website www.rxlist.com/megace-drug/indications-dosage.htm.

MAXIMUS guideline: Decision based on Non-MTUS Citation Megace <http://chemocare.com/chemotherapy/drug-info/Megace.aspx#.VTKoG6Mo6Rs>.

Decision rationale: According to chemocare.com web site, Megace is used "as a supportive medication to treat severe loss of appetite (anorexia), muscle wasting (cachexia) and significant weight loss (> 10% of baseline body weight) associated with cancer and/or AIDS." There is no documentation that the patient is suffering from nutritional issues. Therefore, the request for Megace 400 mg/10 ml, 600 ml is not medically necessary.