

Case Number:	CM15-0042684		
Date Assigned:	03/12/2015	Date of Injury:	09/20/2002
Decision Date:	05/01/2015	UR Denial Date:	02/19/2015
Priority:	Standard	Application Received:	03/06/2015

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: New York

Certification(s)/Specialty: Internal Medicine, Pulmonary Disease

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 58 year old female, who sustained an industrial injury on 9/20/02. The documentation noted that the injured worker had a myocardial infarction due to a stressful job and that after her myocardial infarction she experienced decreased energy and it was hard to keep up with her exercises so she gained weight to over 200 pounds from the 155 that she says she weighed at the time. The documentation on 1/13/15 noted that the injured worker has been diabetic since at least 2010. Her body mass index was 31.53 and her weight was 182 pounds, hemoglobin A1C test was 9.1 and fasting glucose was 247. The diagnoses have included type 2 diabetes mellitus; obesity; hyperlipidemia; hypertension and chronic kidney disease stage 111. Treatment plan is to follow dietary intake and continue current physical activity and to take her diabetic medications. The request was for Renexa and Victoza.

IMR ISSUES, DECISIONS AND RATIONALES

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

Renexa 500mg XR, #60: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation The American College of Endocrinology and the American Association of Clinical Endocrinologist.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Goldman's Cecil Medicine, 24th Edition, Chapter 71 Angina Pectoris. 2011.

Decision rationale: The patient is a 58 year old female with an injury on 09/20/2002. She had an injury and a myocardial infarction with a CABG. BMI is 31.5 and she is overweight. She has chronic renal disease, type II diabetes and hypertension. On 12/11/2014 she was not taking Renexa. There is a caution for using this medication in patients with renal disease and liver disease. A couple of years ago she had a liver biopsy. Although, Renexa is FDA approved for the treatment of chronic angina, this patient has many alternative medications that are also FDA approved for the treatment of angina that are less expensive and without the liver/renal warning. Renexa is not medically necessary for this patient.

Victoza 18mg/3ml 10.6 injection for 4 days then to 1.2 injection #27: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation The American College of Endocrinology and the American Association of Clinical Endocrinologist.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Goldman's Cecil Medicine, 24th Edition. Chapter 237 Type II Diabetes Mellitus 2011.

Decision rationale: The patient is a 58 year old female with an injury on 09/20/2002. She had an injury and a myocardial infarction with a CABG. BMI is 31.5 and she is overweight. She has chronic renal disease, type II diabetes and hypertension. Although Victoza is FDA approved treatment for diabetes, there are numerous alternative medications available to this patient that are also FDA approved for the treatment of diabetes that are less expensive. The long term health outcome with respect to complications of diabetes is related to the HbA1c and not which medications are used to maintain the goal of an HbA1c less than 7. The request is not medically necessary.