

Case Number:	CM14-0153466		
Date Assigned:	09/23/2014	Date of Injury:	08/13/2007
Decision Date:	03/11/2015	UR Denial Date:	09/10/2014
Priority:	Standard	Application Received:	09/19/2014

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: Pennsylvania
 Certification(s)/Specialty: Family Practice

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 45 year old worker, who sustained an industrial injury on August 13, 2007. The details of the injury and immediate symptoms were not documented in the reviewed medical record. The symptoms reported by the injured worker since the date of injury were not documented in the reviewed medical record. The diagnoses have included hypertension. Treatments to date related to the injury were not documented in the reviewed medical record. Currently, the injured worker presented for a blood pressure check and gastrointestinal check and stated that the thighs would fall asleep at times. The treating physician is requesting prescriptions for Benazapril and Losartan. There was no reason for the request documented in the reviewed medical record. On September 10, 2014 Utilization Review non-certified the requests for prescriptions for Benazapril and Losartan noting the lack of documentation to support the medical necessity of the medications. The MTUS, ACOEM Guidelines, and ODG were cited.

IMR ISSUES, DECISIONS AND RATIONALES

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

Losartan #30: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Diabetes (updated 7/28/14)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Up To Date: Hypertension Management

Decision rationale: Losartan is an antihypertensive in the ARB class. It is similar to the ACE inhibitor class of antihypertensives that includes benazepril which this worker is also prescribed. It is not typical to add one of these drugs to the other when a second drug is required. Typically, a drug in another class such as a calcium channel blocker would be added to one of these if a second drug to control hypertension is necessary. Even in this case where it appears the worker is actually on a third drug, hydrochlorothiazide in combination with the benazepril, the addition of losartan to benazepril would not be indicated. There may be other medical history or a history of adverse effects to other medications that could explain this combination but if so, it is not included in the medical record available to this reviewer therefore this medication cannot be considered medically necessary.

Benazepril 10/125mg #120: Upheld

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Up To Date: Hypertension Management

Decision rationale: Benazepril is an ACE inhibitor. It is similar to the ARB class of antihypertensives that includes losartan which this worker is also prescribed. It is not typical to add one of these drugs to the other when a second drug is required. Typically, a drug in another class such as a calcium channel blocker would be added to one of these if a second drug to control hypertension is necessary. There may be other medical history or a history of adverse effects to other medications that could explain this combination but if so, it is not included in the medical record available to this reviewer therefore this medication cannot be considered medically necessary.