

Case Number:	CM15-0110315		
Date Assigned:	06/16/2015	Date of Injury:	03/13/2002
Decision Date:	07/15/2015	UR Denial Date:	05/12/2015
Priority:	Standard	Application Received:	06/08/2015

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: Maryland

Certification(s)/Specialty: Physical Medicine & Rehabilitation, 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 was a 48 year old male, who sustained an industrial injury, March 13, 2002. The injured worker previously received the following treatments Kadian, Norco, Neurontin, Docuprene, Prilosec, Lidocaine Patches, Flurbiprofen cream, Lidoderm Patches, EMG (electrodiagnostic studies) which showed chronic bilaterally L5 and S1 radiculopathy and chronic left S1 radiculopathy, lumbar spine MRI which showed L4-L5 bulge and subligamentous disc bulging L5-S1. The injured worker was diagnosed with lumbar radiculopathy, chronic intractable low back pain, lumbosacral degenerative disc disease, lumbago, lumbar sprain and lumbosacral (joint ligament) sprain. According to progress note of April 27, 2015, the injured workers chief complaint was back pain. The injured worker was seen at this visit for reprogramming of stimulator and reduction in pain mediation dose. The injured worker rated the pain at 7 out of 10 with and 9 out of 10 without. The injured worker was able to perform activities, even paint with his children. The physical exam noted the injured worker walked with a cane. The injured worker appeared uncomfortable due to pain. There was increased tenderness and spasms at the left gluteal ad paraspineous muscles. The lumbar spine had decreased range of motion. The straight leg raise was positive on the left. The deep tendon reflexes were decreased in the bilateral lower extremities. There was decreased sensory to pin prick along the right and left lateral leg. There was weakness on the left dorsal flex. The treatment plan included prescriptions for Kadian, Neurontin and Prilosec.

IMR ISSUES, DECISIONS AND RATIONALES

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

Prilosec 20mg #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 (ODG), Proton pump inhibitors (PPIs).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs, GI symptoms & cardiovascular risk Page(s): 68-69.

Decision rationale: Prilosec 20mg #30 is not medically necessary per the MTUS Chronic Pain Medical Treatment Guidelines. The guidelines state that the patient is at risk for gastrointestinal events if they meet the following criteria (1) age > 65 years; (2) history of peptic ulcer, GI bleeding or perforation; (3) concurrent use of ASA, corticosteroids, and/or an anticoagulant; or (4) high dose/multiple NSAID (e.g., NSAID + low-dose ASA). The guidelines also state that a proton pump inhibitor can be considered if the patient has NSAID induced dyspepsia. The documentation does not indicate that the patient meets the criteria for a proton pump inhibitor therefore the request for Prilosec is not medically necessary.