

<b>Case Number:</b>	CM15-0115941		
<b>Date Assigned:</b>	06/24/2015	<b>Date of Injury:</b>	07/18/2005
<b>Decision Date:</b>	08/27/2015	<b>UR Denial Date:</b>	06/09/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/16/2015

### 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: Anesthesiology

### 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 59-year-old male, who sustained an industrial injury on 7/18/2005. The current diagnoses are hypertension and coronary atherosclerosis. According to the progress report dated 4/10/2015, the injured worker is feeling well. His blood pressure is under control, 120/70. He denies chest pain. The physical examination reveals regular heart rate and rhythm, lungs clear, and neck negative. The medications prescribed are Lipitor, Zetia, Toprol, Lisinopril, Plavix, and Nitro as needed. Treatment to date has included medication management and blood pressure monitoring. A request for Lisinopril has been submitted.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Lisinopril 40mg quantity 30 with six refills:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Mosby's Drug Consult: Lisinopril.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Hypertensive Treatment: Lisinopril.

**Decision rationale:** Lisinopril (Zestril) is a drug of the angiotensin-converting enzyme (ACE) inhibitor class used primarily in the treatment of hypertension, congestive heart failure and myocardial infarction. It also protects renal and retinal complications of diabetes. In this case, there has been document-ation that the patient's blood pressure is well controlled on his present medical regimen. Medical necessity for the requested medication has been established. The requested medication is medically necessary.