

<b>Case Number:</b>	CM15-0126577		
<b>Date Assigned:</b>	07/13/2015	<b>Date of Injury:</b>	04/05/2011
<b>Decision Date:</b>	08/06/2015	<b>UR Denial Date:</b>	06/02/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/30/2015

### 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: California, Indiana, New York  
Certification(s)/Specialty: Internal 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 50 year old male, who sustained an industrial injury on 04/05/2011. The injured worker reported that he fell into a trench while carrying 100 pounds of asphalt causing injury to the low back at lumbar four to five and the left hip. The injured worker was diagnosed as having severe single episode of major depression and pain disorder associated with psychological factors and general medical condition. Treatment and diagnostic studies to date has included use of gym, psychiatric treatment, and medication regimen. In a progress note dated 05/23/2015 the treating physician reports continued physical and psychiatric symptoms with chronic pain to the low back, hip, and groin along with persistent depression, irritable mood, loss of pleasure, sleep disturbance, with frequent nightmares, appetite disturbance, significant weight gain, low self-esteem, and difficulty concentrating. Examination reveals the injured worker to be mildly depressed, anxious, and irritable. The treating physician noted that the injured worker has had responded moderately well to use anti-depressant therapy. The treating physician requested the medications of Lunesta 3 mg with a quantity of 30 with 1 refill with the treating physician noting that a sleeping medication is medically necessary to treat insomnia associated with depression and that this medication does not have the same restrictions for short-term use that Zolpidem has. The treating physician also requested the medication Cialis 20mg with a quantity of 8 with the treating physician noting that this medication is medically necessary to treat erectile dysfunction that is caused by use of an anti-depressant that is prescribed to the injured worker.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Lunesta 3 mg #30 with 1 refill:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain section, Lunesta.

**Decision rationale:** Pursuant to the Official Disability Guidelines, Eszopicolone (Lunesta) 3 mg #30 with 1 refill is not medically necessary. Lunesta is not recommended for long-term use, but recommended for short-term use. The guidelines recommend limiting hypnotics to three weeks maximum in the first two months of injury only. Pain specialists rarely, if ever, recommend them for long-term use. They can be habit forming and may impair function and memory more than opiate pain relievers. See the guidelines for additional details. In this case, the injured worker's working diagnoses are major depression, single episode, severe; and pain disorder with psychological factors and a general medical condition. The date of injury is April 5, 2011. The request for authorization is May 26, 2015. The earliest progress note in the medical record containing Lunesta 3mg is dated December 29, 2014. Viagra 100 mg was prescribed at that time. Viagra and Lunesta were continued through March 19, 2015. Lunesta was prescribed for insomnia. The documentation does not indicate objective functional improvement with a change in sleep pattern. Lunesta is not recommended for long-term use, but recommended for short-term use. The guidelines recommend limiting hypnotics to three weeks maximum in the first two months of injury only. There are no compelling clinical facts to support the long-term use (in excess of five months) of Lunesta. The start date is not documented, only the earliest progress note. Consequently, absent compelling clinical documentation to support the ongoing use of Lunesta, no documentation demonstrating objective functional improvement and guideline recommendations for short-term use, Eszopicolone (Lunesta) 3 mg #30 with 1 refill is not medically necessary.

**Cialis 20 mg #8:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation  
<http://www.nlm.nih.gov/medlineplus/druginfo/meds/a604008.html>.

**Decision rationale:** Pursuant to Medline plus, Cialis 20 mg #8 is not medically necessary. Tadalafil (Cialis) is used to treat erectile dysfunction (ED, impotence; inability to get or keep an erection), and the symptoms of benign prostatic hyperplasia (BPH; an enlarged prostate) which include difficulty urinating (hesitation, dribbling, weak stream, and incomplete bladder emptying), painful urination, and urinary frequency and urgency in adult men. Tadalafil

(Adcirca) is used to improve the ability to exercise in people with pulmonary arterial hypertension (PAH; high blood pressure in the vessels carrying blood to the lungs, causing shortness of breath, dizziness, and tiredness). Tadalafil is in a class of medications called phosphodiesterase (PDE) inhibitors. It works to treat erectile dysfunction by increasing blood flow to the penis during sexual stimulation. This increased blood flow can cause an erection. Tadalafil treats PAH by relaxing the blood vessels in the lungs to allow blood to flow more easily. In this case, the injured worker's working diagnoses are major depression, single episode, severe; and pain disorder with psychological factors and a general medical condition. The date of injury is April 5, 2011. The request for authorization is May 26, 2015. The earliest progress note in the medical record containing Lunesta 3mg is dated December 29, 2014. Viagra 100 mg was prescribed at that time. Viagra and Lunesta were continued through March 19, 2015. In a progress note dated May 23, 2015, subjectively the injured worker complained of low back pain and left hip pain and suffers with psychiatric symptoms. The injured worker was taking Viagra 100 mg through March 9, 2015. The documentation did not demonstrate objective functional improvement with recurrent refills for Viagra 100 mg. On May 23, 2015, the treating provider changed Viagra 100 mg to Cialis 20 mg. There is no clinical rationale the medical record for changing Viagra to Cialis. Additionally, as noted above, there was no documentation of objective functional improvement with ongoing Viagra. Consequently, absent clinical documentation with the clinical rationale for changing Viagra to Cialis, Cialis 20 mg #8 is not medically necessary.