

Case Number:	CM15-0172933		
Date Assigned:	09/22/2015	Date of Injury:	06/07/2010
Decision Date:	11/16/2015	UR Denial Date:	07/30/2015
Priority:	Standard	Application Received:	09/02/2015

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

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 (IW) is a 57 year old male who sustained an industrial injury on 06/07/2010. The worker complained of lower back pain. He was given X-rays, a MRI that showed a pinched nerve, and was given time off work with physical therapy (with temporary relief), and was released to work in November 2010. On April 18, 2012, the worker had lower back surgery and received physical therapy post-operative. According to the Secondary Treating Physician's Narrative Progress Report for Internal Medicine on 06-04-2015, he is currently being treated for abdominal pain, acid reflux , hypertension (industrially aggravated), blurred vision secondary to hypertension, hyperlipidemia (per private medical doctor), and sleep disorder, rule out obstructive sleep apnea. His medications include Metoprolol, Lisinopril, Dexilant, and Aspirin. In the provider notes of 06/04/2015, the injured worker has improved abdominal pain, unchanged sleeping difficulty and unchanged visual disturbance. His average home blood pressure was 115/73. His physical exam showed a soft and non-tender, non-distended abdomen with normoactive bowel sounds, no hepatosplenomegaly or guarding. His orthopedic issues were deferred to the appropriate specialist. A request for authorization was submitted for: 1. Metoprolol 50mg, #60 with 2 refills. 2. Lisinopril 20mg, #60 with 2 refills. 3. Dexilant 60mg, #30 with 2 refills. 4. ASA 81mg, #30 with 2 refills. 5. Lab: Urine toxicology. 6. Lab: Microalbuminuria. 7. Lab: Urine test. 8. Lab: Random (UMAR). 9. Lab: CMPR x2. 10. Lab: CBD. 11. Lab: TSH x2. 12. Lab: T3. 13. Lab: AML. 14. Lab: LIPS. 15. Lab: HPYA. 16. Lab: CBC x2. 17. Lab: T4. 18. Lab: Lipid. 19. Lab: CMP. A utilization review decision 07-30-2015 Non-Certified the requests.

IMR ISSUES, DECISIONS AND RATIONALES

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

Metoprolol 50mg, #60 with 2 refills: Overturned

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) www.nlm.nih.gov/medlineplus/.

Decision rationale: MTUS does not address this request. Metoprolol is in a class of medications called beta blockers, used alone or in combination with other medications to treat high blood pressure and heart failure. It also is used to prevent angina (chest pain) and to improve survival after a heart attack. Documentation provided shows that the injured worker is diagnosed with partly Industrial-related Hypertension, which is fairly controlled on current medication regimen. The medical necessity for ongoing use of Metoprolol is established. The request for Metoprolol 50mg, #60 with 2 refills is medically necessary.

Lisinopril 20mg, #60 with 2 refills: Overturned

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 www.nlm.nih.gov/medlineplus/.

Decision rationale: MTUS does not address this request. Lisinopril is an Angiotensin-converting enzyme inhibitors (ACE inhibitor) used to treat Hypertension and Heart disease. Documentation provided shows that the injured worker is diagnosed with partly Industrial-related Hypertension, which is controlled on current medication regimen, supporting the medical necessity for ongoing use of Lisinopril. The request for Lisinopril 20mg, #60 with 2 refills is medically necessary by guidelines.

Dexilant 60mg, #30 with 2 refills: Overturned

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): NSAIDs, GI symptoms & cardiovascular risk.

Decision rationale: Proton Pump Inhibitors (PPIs) are used to treat gastrointestinal conditions such as Gastroesophageal reflux disease, Dyspepsia and Gastric ulcers, and to prevent

ulcerations due to long term use of Non-steroidal anti-inflammatory drugs (NSAIDs). MTUS recommends the combination of NSAIDs and PPIs for patients at risk for gastrointestinal events, including age over 65 years of age, history of peptic ulcer, gastrointestinal bleeding, or perforation, concurrent use of ASA and high dose or multiple NSAIDs. Documentation shows that the injured worker is being treated for Gastritis and gastroesophageal reflux disease, with history of positive H. pylori. The recommendation to continue Dexilant is reasonable and clinically appropriate. The request for Dexilant 60mg, #30 with 2 refills is medically necessary per MTUS guidelines.

ASA 81mg, #30 with 2 refills: Overturned

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 www.uptodate.com/.

Decision rationale: MTUS does not address this request. Aspirin is in a group of medications called salicylates that may be used to prevent heart attacks and ischemic strokes in people who are at risk or have had this type of stroke or mini-stroke in the past. The 2012 American College of Chest Physicians Antithrombotic Therapy and Prevention of Thrombosis guideline on the Primary and secondary prevention of cardiovascular (Heart) disease recommend low-dose aspirin (as opposed to no aspirin) for primary prevention in all persons over the age of 50 years. Guidelines stress the importance of individual clinical judgment, which should include an assessment of the absolute benefits and risks of Aspirin use. Documentation reveals that the injured worker is over 50 years of age and diagnosed with Hypertension, which may increase cardiovascular risk. The ongoing use of Aspirin prophylaxis is clinically appropriate. The request for ASA 81mg, #30 with 2 refills is medically necessary per guidelines.

Lab: Urine toxicology: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009. Decision based on Non-MTUS Citation Official Disability Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Opioids, differentiation: dependence & addiction. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Opioids, Urine drug tests.

Decision rationale: Documentation does not show that the injured worker is being treated with Opioid analgesics or at high risk of addiction or aberrant behavior to establish the medical necessity for urine drug testing. With guidelines not being met, the request for Urine toxicology is not medically necessary.

Lab: Microalbuminuria: 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://smartmedicine.acponline.org/content> and <http://www.mayoclinic.org/>.

Decision rationale: MTUS does not address this request. The American College of Physicians recommends screening patients at increased risk for Chronic Kidney disease (CKD) regularly, including those who are older, obese, have a history of hypertension, diabetes, cardiovascular disease, or a family history of CKD. Screening patients without risk factors for CKD is not recommended. Per guidelines, creatinine, urinalysis, retinal exam may be screened annually, and ECG may be considered if there are unexplained symptoms or poor BP control. The injured worker is diagnosed with Hypertension, which is fairly controlled. The medical necessity for urine testing at this time has not been established. The request for Lab: Microalbuminuria is not medically necessary.

Lab: Urine test: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): NSAIDs, specific drug list & adverse effects. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Preoperative lab testing and Other Medical Treatment Guidelines www.smartmedicine.acponline.org/content, Hypertension.

Decision rationale: MTUS recommends routine periodic laboratory monitoring for patients on non-steroidal anti-inflammatory drugs (NSAIDs) according to package inserts, to include CBC (complete blood count) and chemistry profile (including liver and renal function tests). MTUS does not make recommendations regarding urine analysis. ODG recommends preoperative urinalysis for patients undergoing invasive urologic procedures and those undergoing implantation of foreign material. The American College of Physicians recommends laboratory testing, including urinalysis in certain patients with Hypertension to assess for target organ damage. The injured worker is diagnosed with Hypertension, which is fairly controlled. Documentation fails to show that the injured worker is taking NSAIDs or undergoing surgery. The request for Lab: Urine test is not medically necessary by guidelines.

Lab: Random (UMAR): 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 www.smartmedicine.acponline.org/content and www.mayoclinic.org/.

Decision rationale: MTUS does not address this request. The American College of Physicians recommends screening patients at increased risk for Chronic Kidney disease (CKD) regularly, including those who are older, obese, have a history of hypertension, diabetes, cardiovascular disease, or a family history of CKD. Screening patients without risk factors for CKD is not recommended. Per guidelines, creatinine, urinalysis, retinal exam may be screened annually, and ECG may be considered if there are unexplained symptoms or poor BP control. The injured worker is diagnosed with Hypertension, which is fairly controlled. The medical necessity for urine testing at this time has not been established. The request for Lab: Random (UMAR) is not medically necessary.

Lab: CMPR x2: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.fpnotebook.com/cv/Htn/HyprtnsnEvltnLbs.htm>.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation www.smartmedicine.acponline.org/content and www.mayoclinic.org/.

Decision rationale: MTUS does not address this request. The American College of Physicians recommends screening patients at increased risk for Chronic Kidney disease (CKD) regularly, including those who are older, obese, have a history of hypertension, diabetes, cardiovascular disease, or a family history of CKD. Screening patients without risk factors for CKD is not recommended. Per guidelines, creatinine, urinalysis, retinal exam may be screened annually, and ECG may be considered if there are unexplained symptoms or poor BP control. Patients on certain medications, including diuretics, ACE inhibitors, ARB, and mineralocorticoid antagonists (spironolactone) should have potassium, creatinine, and other electrolytes monitored for potential side effects. Documentation provided shows that the injured worker is diagnosed with Hypertension, treated with an ACE inhibitor. The request for Lab: CMPR x2 is medically necessary per guidelines.

Lab: CBD: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): NSAIDs, specific drug list & adverse effects. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Preoperative lab testing and Other Medical Treatment Guidelines www.smartmedicine.acponline.org/content, Hypertension.

Decision rationale: Per ODG, a complete blood count is indicated for patients with diseases that increase the risk of anemia or patients in whom significant perioperative blood loss is anticipated. MTUS recommends routine periodic laboratory monitoring for patients on non-steroidal anti-inflammatory drugs (NSAIDs) according to package inserts, to include CBC

(complete blood count) and chemistry profile (including liver and renal function tests). The injured worker is diagnosed with Hypertension, which is fairly controlled. Documentation provided fails to show that the injured worker is taking NSAIDs chronically or carries the diagnosis of Anemia. The request for Lab: CBD is not medically necessary per guidelines.

Lab: TSH x2: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.fpnotebook.com/cv/Htn/HyprtnsnEvltLbs.htm>.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation www.dynamed.com/ and www.mayoclinic.org/.

Decision rationale: MTUS does not address this request. Blood tests used in the diagnosis of Thyroid disorders include Thyroid Stimulating Hormone level. The injured worker complains of chronic pain and fatigue, with a long term diagnosis of Fibromyalgia. Physician reports fail to show that the injured worker has symptoms or objective clinical findings on physical examination to support the suspicion of other pathology consistent with Thyroid Disease. The request for Lab: TSH x2 is not medically necessary.

Lab: T3: 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 www.dynamed.com/ and www.mayoclinic.org/.

Decision rationale: MTUS does not address this request. Blood tests used in the diagnosis of Thyroid disorders include Thyroid Stimulating Hormone level. The injured worker complains of chronic pain and fatigue, with a long term diagnosis of Fibromyalgia. Physician reports fail to show that the injured worker has symptoms or objective clinical findings on physical examination to support the suspicion of other pathology consistent with Thyroid Disease. The request for Lab: T3 is not medically necessary.

Lab: AML: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.fpnotebook.com/cv/Htn/HyprtnsnEvltLbs.htm>.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation www.dynamed.com/ and www.mayoclinic.org/.

Decision rationale: MTUS does not address this request. Blood tests used in the diagnosis of Thyroid disorders include Thyroid Stimulating Hormone level. The injured worker complains of chronic pain and fatigue, with a long term diagnosis of Fibromyalgia. Physician reports fail to show that the injured worker has symptoms or objective clinical findings on physical examination to support the suspicion of other pathology consistent with Thyroid Disease. The request for Lab: AML is not medically necessary.

Lab: LIPS: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation

<http://www.fpnotebook.com/cv/Htn/HyprtnsnEvltLnLbs.htm>.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS.

Decision based on Non-MTUS Citation www.smartmedicine.acponline.org/.

Decision rationale: MTUS does not address this request. Hyperlipidemia is a major risk factor for atherosclerotic disease (the build-up of fats, cholesterol and other substances in and on the artery walls), cardiovascular disease and cardiovascular death. The American College of Physicians recommends screening adults at any age who are at risk for CHD, including those with a family history of hyperlipidemia. Patients without risk factors should be screened every 5 years with repeat screening sooner in those who develop new risk factors. The injured worker is diagnosed with Hypertension, which may increase the risk for CHD. The recommendation for lipid screening is reasonable. The request for Lab: LIPS is medically necessary.

Lab: HPYA: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation

<http://www.fpnotebook.com/cv/Htn/HyprtnsnEvltLnLbs.htm>.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS.

Decision based on Non-MTUS Citation www.mayoclinic.org/.

Decision rationale: MTUS does not address this request. H. pylori antibody testing is used to detect evidence of an active or previous H. pylori infection. The injured worker is diagnosed with Industrial-related Gastritis and history of positive H. pylori, treated with Dexilant. Documentation at the time of the requested service indicates that abdominal pain is improved. The medical necessity of additional H. pylori testing has not been established. The request for is not medically necessary per guidelines.

Lab: CBC x2: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation

<http://www.fpnotebook.com/cv/Htn/HyprtnsnEvltLnLbs.htm>.

MAXIMUS guideline: The Expert Reviewer based their decision on the MTUS Chronic Pain Medical Treatment 2009 Guidelines, Section(s): NSAIDS, specific drug list & adverse effects. Decision based on Official Disability Guidelines, Preoperative lab testing and www.smartmedicine.acponline.org/content, Hypertension/.

Decision rationale: Per ODG, a complete blood count is indicated for patients with diseases that increase the risk of anemia or patients in whom significant perioperative blood loss is anticipated. MTUS recommends routine periodic laboratory monitoring for patients on non-steroidal anti-inflammatory drugs (NSAIDS) according to package inserts, to include CBC (complete blood count) and chemistry profile (including liver and renal function tests). The injured worker is diagnosed with Gastritis and Hypertension. Documentation provided fails to show that the injured worker is taking NSAIDs chronically or carries the diagnosis of Anemia. The request for Lab: CBC x2 is not medically necessary per guidelines.

Lab: T4: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.fpnotebook.com/cv/Htn/HyprtnsnEvltLnLbs.htm>.

MAXIMUS guideline: The Expert Reviewer based their decision on the Non-MTUS www.dynamed.com/ and www.mayoclinic.org/.

Decision rationale: MTUS does not address this request. Blood tests used in the diagnosis of Thyroid disorders include Thyroid Stimulating Hormone level. The injured worker complains of chronic pain and fatigue, with a long term diagnosis of Fibromyalgia. Physician reports fail to show that the injured worker has symptoms or objective clinical findings on physical examination to support the suspicion of other pathology consistent with Thyroid Disease. The request for Lab: T4 is not medically necessary.

Lab: Lipid: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.fpnotebook.com/cv/Htn/HyprtnsnEvltLnLbs.htm>.

MAXIMUS guideline: The Expert Reviewer based their decision on the Non-MTUS www.smartmedicine.acponline.org/.

Decision rationale: MTUS does not address this request. Hyperlipidemia is a major risk factor for atherosclerotic disease (the build-up of fats, cholesterol and other substances in and on the artery walls), cardiovascular disease and cardiovascular death. The American College of Physicians recommends screening adults at any age who are at risk for CHD, including those with a family history of hyperlipidemia. Patients without risk factors should be screened every 5 years with repeat screening sooner in those who develop new risk factors. The injured worker is

diagnosed with Hypertension, which may increase the risk for CHD. The recommendation for lipid screening is reasonable. The request for Lab: Lipid is medically necessary.

Lab: CMP: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation
<http://www.fpnotebook.com/cv/Htn/HyprtnsnEvltLnLbs.htm>.

MAXIMUS guideline: The Expert Reviewer based their decision on the Non-MTUS
www.smartmedicine.acponline.org/content and www.mayoclinic.org/.

Decision rationale: MTUS does not address this request. The American College of Physicians recommends screening patients at increased risk for Chronic Kidney disease (CKD) regularly, including those who are older, obese, have a history of hypertension, diabetes, cardiovascular disease, or a family history of CKD. Screening patients without risk factors for CKD is not recommended. Per guidelines, creatinine, urinalysis, retinal exam may be screened annually, and ECG may be considered if there are unexplained symptoms or poor BP control. Patients on certain medications, including diuretics, ACE inhibitors, ARB, and mineralocorticoid antagonists (spironolactone) should have potassium, creatinine, and other electrolytes monitored for potential side effects. Documentation provided shows that the injured worker is diagnosed with Hypertension, treated with an ACE inhibitor. The request for Lab: CMP is medically necessary per guidelines.