

Case Number:	CM15-0179428		
Date Assigned:	09/21/2015	Date of Injury:	05/17/1997
Decision Date:	10/30/2015	UR Denial Date:	08/28/2015
Priority:	Standard	Application Received:	09/11/2015

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, District of Columbia, Maryland
 Certification(s)/Specialty: Anesthesiology, Pain Management

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 51 year old male, who sustained an industrial injury on May 17, 1997. There is no historical information indicating the mechanism of injury nor is there any information indicating prior treatment. Medical records indicate that the injured worker is undergoing treatment for prostate cancer, erectile dysfunction, hypogonadism and urinary incontinence. The current work status was not identified. A urological evaluation dated July 21, 2015 notes that the injured worker was doing Kegel exercises and had rare urinary accidents at night. The injured worker was taking Stendra for erectile dysfunction and had a 65-70% erectile response. The injured workers testosterone was markedly decreased. A Testopel implant was performed during the visit. A current medication list was not provided. The treating physician's request for authorization dated July 21, 2015 includes a request for Stendra 200 mg. The Utilization Review documentation dated August 28, 2015 non-certified the request for Stendra 200 mg.

IMR ISSUES, DECISIONS AND RATIONALES

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

Stenda 200mg: Upheld

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation
<http://www.ncbi.nlm.nih.gov/pubmedhealth/PMHT0009158/?report=details>.

Decision rationale: The MTUS and ODG guidelines are silent on the use of Stendra. Per the US National Library of Medicine, Avanafil is used to treat men who have erectile dysfunction (also called sexual impotence). Avanafil belongs to a group of medicines called phosphodiesterase 5 (PDE5) inhibitors. These medicines prevent an enzyme called phosphodiesterase type-5 from working too quickly. The penis is one of the areas where this enzyme works. Per urological evaluation dated 7/21/15, it was noted that the injured worker took Stendra 300mg and had a 65-70% erectile response. "The patient's testosterone today was markedly decreased at 89 ng/dL; normal would be 250-1111ng/dL." The documentation submitted for review does not provide an adequate history of the injured worker's condition. There is no description of the industrial injury and how it results in the erectile dysfunction. It is unclear if the erectile dysfunction will improve with testosterone repletion. While it is noted that there is an erectile response, medical necessity cannot be affirmed without the aforementioned history. The request is not medically necessary.