

Case Number:	CM15-0060864		
Date Assigned:	04/07/2015	Date of Injury:	05/01/2012
Decision Date:	05/28/2015	UR Denial Date:	03/24/2015
Priority:	Standard	Application Received:	03/31/2015

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: Texas, New York, California
 Certification(s)/Specialty: Preventive Medicine, Occupational 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 applicant is a represented 52-year-old [REDACTED] beneficiary who has filed a claim for chronic low back, knee, and finger pain reportedly associated with an industrial injury of May 1, 2012. In a utilization review report dated March 24, 2015, the claims administrator failed to approve a request for Cialis. The claims administrator referenced an RFA form received on March 15, 2015 in its determination. The claims administrator seemingly denied the request, in part, on causation grounds, suggesting that there is no concrete evidence that the applicant's erectile dysfunction was a function of the applicant's industrial low back pain complaints. The applicant's attorney subsequently appealed. In a progress note dated February 23, 2015, difficult to follow, not entirely legible, the applicant was apparently returned to work. The applicant's complaints of low back, knee, and finger pain were reported. The note was handwritten, sparse, and quite difficult to follow. The applicant's genitourinary review of systems was, however, positive for erectile dysfunction, it was stated through preprinted check boxes. Naprosyn, Prilosec, and Cialis were apparently endorsed. Cialis was endorsed on an as-needed basis. 10 tablets of the same were apparently prescribed and/or dispensed.

IMR ISSUES, DECISIONS AND RATIONALES

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

Cialis 10mg #10: Overturned

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 3 Initial Approaches to Treatment Page(s): 47. Decision based on Non-MTUS Citation <http://www.auanet.org/education/guidelines/erectile-dysfunction.cfm> Erectile Dysfunction Download the unabridged version of this guideline [pdf] The Management of Erectile Dysfunction (2005) Panel Members: Drogo K. Montague, MD, Co-Chair; Jonathan P. Jarow, MD, Co-Chair; Gregory A. Broderick, MD; Roger R. Dmochowski, MD; Jeremy P.W. Heaton, MD; Tom F. Lue, MD; Aaron J. Milbank, MD; Ajay Nehra, MD; Ira D. Sharlip, MD Chapter 1: AUA Guideline on the Management of Erectile Dysfunction: Diagnosis and Treatment.

Decision rationale: Yes, the request for Cialis, a phosphodiesterase inhibitor, was medically necessary, medically appropriate, and indicated here. The MTUS Guideline in ACOEM Chapter 3, page 47 stipulates that an attending provider should incorporate some discussion of efficacy of medication for the particular condition for which it has been prescribed into his choice of recommendations so as to ensure proper use and so as to manage expectations. Here, the attending provider did state that Cialis was being introduced for issues with erectile dysfunction on February 23, 2015. The American Urological Association (AUA) notes that 5-phosphodiesterase inhibitors such as Cialis do represent a first-line therapy for erectile dysfunction, as was present here. Therefore, the request is medically necessary.