

Case Number:	CM14-0118330		
Date Assigned:	08/06/2014	Date of Injury:	11/30/2004
Decision Date:	11/10/2015	UR Denial Date:	07/16/2014
Priority:	Standard	Application Received:	07/28/2014

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

Certification(s)/Specialty: Family Practice

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This 61 year old man sustained an industrial injury on 11-30-2004. Diagnoses include hypogonadism and erectile dysfunction. Treatment has included oral medications. Physician notes from urology dated 6-26-2014 show complaints of erectile dysfunction and knee pain. The worker states he is not taking the 5mg Cialis due to insurance denial; however, there is no mention of the 20 mg Cialis that was prescribed as a "booster" being denied. The physical examination shows a slight limp to the right, no physical deformities to the genitalia, and slightly atrophic testicles to palpation. Recommendations include Delatestryl injection (administered during this visit), continue Cialis 20 mg as needed, and follow up in three weeks. Utilization Review denied a request for Cialis 20 mg on 7-16-2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Cialis 20mg, 12 tablets - 1 tablet po PRN with 5 refills for symptoms related to Urological Injury: 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 American Urological Association Guidelines & Policies on Erectile Dysfunction: Accessed: www.auanet.org/education/guidelines/erectile-dysfunction.cfm (11/4/2015).

Decision rationale: The ACOEM, Chronic Pain Medical Treatment Guidelines and the Official Disability Guidelines, do not comment on the topic of erectile dysfunction. The Cochrane Database also does not provide a review of this subject. The National Guideline Clearinghouse has the American Urological Association Education and Research, recommendations for "The Management of Erectile Dysfunction." These guidelines pertain to the target population of "men who have erectile dysfunction after a well-established period of normal erectile function, whose erectile dysfunction is primarily organic rather than psychological in nature, and who have no evidence of hypogonadism or hyperprolactinemia. An evaluation is recommended for all patients to include identification of comorbidities and psychosexual dysfunctions through a sexual, medical and psychosocial history." A focused physical examination is also recommended. Management and treatment recommendations include: 1. Educating the patients regarding treatment options and associated risks and benefits. 2. Managing risk factors for erectile dysfunction. 3. Considering comorbidities when managing patients with erectile dysfunction. 4. Pharmacologic therapy with phosphodiesterase inhibitors (such as Cialis). 5. Vacuum constriction devices. 6. Surgery including a penile prosthesis. 7. Periodic follow-up of efficacy, side effects, and change in health status. The available medical records indicate that the patient has undergone an evaluation by a Urologist for erectile dysfunction. In the Utilization Review process, there was an agreement that 8 tablets of Cialis 20mg was acceptable. There are no guidelines available as to the expected number of Cialis tablets approved per month. The agreement to support 8 tablets per month is reasonable and within the community standards of practice. Therefore, 12 tablets of Cialis 20mg with 5 refills is not medically necessary; but the compromise to provide 8 tablets of Cialis 20mg is within the community standards of practice.