

<b>Case Number:</b>	CM13-0034093		
<b>Date Assigned:</b>	03/19/2014	<b>Date of Injury:</b>	09/08/2002
<b>Decision Date:</b>	08/26/2014	<b>UR Denial Date:</b>	10/04/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/17/2013

### 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. The expert reviewer is Board Certified in Orthopedic Surgery and is licensed to practice in California. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

### 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 43-year-old male sustained an industrial injury on 9/8/02. Injury occurred when the patient was climbing down a ladder and missed a step, twisting his back. The patient was status post lumbar laminectomy and fusion from L4 to S1. The 9/26/13 treating physician progress report cited complaints of low back and left leg pain with some numbness and tingling. Additional complaints included neck soreness and bilateral hip pain, left greater than right. The patient was using up to 3 Norco 10/325 mg per day and some Xanax 2 mg as needed for symptom control. Xanax had not been authorized by the carrier for the past 2 months. He was using a home Jacuzzi for pain control. He was attempting to cut down on smoking, using a cigarette substitute. The diagnosis included grade 2 spondylolisthesis at L5/S1, degenerative disc disease L4/5 and L5/S1 status post laminectomy and fusion, and bilateral lower extremity radiculitis. The treatment plan recommended pain management referral for consultation and bilateral sacroiliac joint injections. Medications were prescribed including Norco 10/325 mg for pain and Xanax 2 mg for anxiety. The 10/4/13 utilization review modified the request for Xanax 2 mg (quantity unspecified) to Xanax 2 mg #30 with no refills for the purposes of tapering as guidelines did not support long term use. Records indicated that the patient has been using Xanax since at least April 2013 for anxiety with no indication of benefit or assessment of psychological status noted.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**XANAX 2MG (UNSPECIFIED):** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines  
MUSCLE RELAXANTS.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines  
Benzodiazepines Page(s): 24.

**Decision rationale:** The California Chronic Pain Medical Treatment Guidelines do not recommend the long-term use of benzodiazepines, such as Xanax, because long-term efficacy is unproven and there is a risk of dependence. Guidelines limit their use to 4 weeks and indicate that they are the treatment of choice in very few conditions. Long-term use may actually increase anxiety. Weaning of benzodiazepines has a recommended taper rate of 1/8 to 1/10 of the daily dose every 1 to 2 weeks. Guideline criteria have not been met for continued use of Xanax. The 10/4/13 utilization review modified the request for Xanax 2 mg to allow for #30 tablets for the purpose of tapering. There is no compelling reason presented to support the medical necessity of continued Xanax use in the absence of guideline support for long term use of this medication. There is no documentation of a specific functional benefit with use or increase in symptoms when not used. Therefore, this unspecified request for Xanax 2 mg is not medically necessary.