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| Case Number: | CM13-0046626 | | |
| Date Assigned: | 12/27/2013 | Date of Injury: | 05/01/2009 |
| Decision Date: | 03/07/2014 | UR Denial Date: | 10/14/2013 |
| Priority: | Standard | Application Received: | 11/12/2013 |

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Occupational Medicine 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 physician 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:

The applicant is represented [REDACTED] employee who has filed a claim for chronic low back pain, chronic mid back pain, and chronic knee pain reportedly associated with an industrial injury of May 1, 2009. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representation; transfer of care to and from various providers in various specialties; and various other medications for gastrointestinal purposes. In a utilization review report of October 14, 2013, the claims administrator denied request for dicyclomine (Bentyl) and topical Lidoderm patches. The applicant's attorney later appealed. However, the applicant's attorney did not attach any progress notes or medical rationale behind the appeal. It is noted that the claims administrator did seemingly have access to some medical progress notes referenced in its decision.

IMR ISSUES, DECISIONS AND RATIONALES

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

Pharmacy purchase of Dicyclomine Tab 20mg #60 (30 days supply): 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 PDR: <http://www.pdr.net/drug-summary/bentyl?druglabelid=1358>.

Decision rationale: The MTUS does not address the topic. As noted in the Physicians' Drug Reference (PDR), dicyclomine or Bentyl is indicated in the treatment of irritable bowel syndrome. In this case, however, no clinical progress notes were attached to the request for authorization. The attending provider, applicant, and applicant's attorney did not furnish any evidence of irritable bowel syndrome along with the request for authorization or along with the application for independent medical review. The diagnosis of and/or symptoms associated with irritable bowel syndrome have not been detailed or described. Again, no clinical progress notes were attached to the application for independent medical review. Accordingly, the request remains non-certified.

Lidocaine Pad 5% #60 (30 day supply): Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 112.

Decision rationale: As noted on page 112 of the MTUS Chronic Pain Medical Treatment Guidelines, topical lidocaine patches are indicated in the treatment of neuropathic pain in individuals in whom there has been a trial of first line therapy with antidepressants and/or anticonvulsants. In this case, however, the documentation on file does not establish either diagnosis of neuropathic pain or the failure of first line antidepressants and/or anticonvulsants. Again, no clinical progress notes were attached to the request for authorization. The applicant's attorney did not furnish any clinical rationale alongside the application for independent medical review (IMR). Therefore the request for lidocaine pads or patches remains non certified, on independent medical review, owing to lack of supporting documentation.