

Case Number:	CM14-0113516		
Date Assigned:	08/01/2014	Date of Injury:	04/04/2001
Decision Date:	10/16/2014	UR Denial Date:	07/10/2014
Priority:	Standard	Application Received:	07/21/2014

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. The expert 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 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:

The applicant is a represented [REDACTED] employee who has filed a claim for chronic neck pain reportedly associated with an industrial injury of April 4, 2001. Thus far, the applicant has been treated with the following: Analgesic medications; earlier lumbar laminectomy surgery; unspecified amounts of physical therapy; opioid therapy; and topical agents. In a Utilization Review Report dated July 10, 2014, the claims administrator denied a request for topical Flector patches and topical Lidoderm patches. The applicant's attorney subsequently appealed. In a progress note dated January 17, 2014 the applicant reported persistent complaints of neck pain, depression, and anxiety. The applicant was using BuTrans, Flector, Lidoderm, Tizanidine, and trazodone, it was stated. 7/10 pain was reported. The applicant did report episodic pain as high as 10/10, however. Multiple medications were refilled, including Tizanidine, trazodone, Lidoderm, and Buprenorphine. The applicant's work status was not clearly identified.

IMR ISSUES, DECISIONS AND RATIONALES

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

Transdermal Patches of Flector 1.3% #60: 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 Topical Diclofenac/Voltaren section. Page(s): 112.

Decision rationale: Flector is a derivative of topical diclofenac/Voltaren. However, as noted on page 112 of the MTUS Chronic Pain Medical Treatment Guidelines, topical diclofenac/Voltaren has "not been evaluated" for treatment involving the spine, hip, and/or shoulder. In this case, however, the applicant's primary pain generator is, in fact, the cervical spine, a body part for which topical diclofenac/Voltaren/Flector has been not evaluated. The attending provider did not proffer any compelling applicant-specific rationale or medical evidence which would augment the tepid-to-unfavorable MTUS position on the same. Therefore, the request is not medically necessary.

Lidoderm 5% #90 with 5 refills: 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 Topical Lidocaine section. Page(s): 112.

Decision rationale: As noted on page 112 of the MTUS Chronic Pain Medical Treatment Guidelines, topical lidocaine is indicated in the treatment of localized peripheral pain/neuropathic pain in applicants in whom there has been a trial of first-line therapy with antidepressants and/or anticonvulsants. In this case, however, the applicant's ongoing usage of trazodone, an antidepressant adjuvant medication, effectively obviates the need for the Lidoderm patches at issue. Therefore, the request is not medically necessary.