

Case Number:	CM14-0150027		
Date Assigned:	09/18/2014	Date of Injury:	01/31/2003
Decision Date:	10/17/2014	UR Denial Date:	08/22/2014
Priority:	Standard	Application Received:	09/15/2014

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 Physical Medicine & Rehabilitation, 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 58 year old patient had a date of injury on 1/31/2003. The mechanism of injury was tripped over a parking stone and landed on her back. In a progress noted dated 7/24/2014, the pain continues, medications are helpful, and the patient has been doing exercise such as pool therapy and acupuncture. On a physical exam dated 7/24/2014, the patient uses a cane to assist in ambulation. He is limping. The diagnostic impression shows depressive psychosis, psychogenic pain, insomnia, and pain in joint, cervicalgia, lumbago. Treatment to date: medication therapy, behavioral modification, acupuncture, pool therapy. A UR decision dated 8/22/2014 denied the request for Hydrocodone/APAP 325 #60, modifying it to #30, stating no documented functional improvement from previous usage, and therefore weaning should be initiated. Flexeril powder compound 3gm, and Gabapentin powder 3gm was denied, stating guidelines do not recommend topical creams, and there was no evidence of failure of Lyrica. Flexeril 7.5mg #90 was denied, stating there was no evidence patient could not tolerate NSAIDs.

IMR ISSUES, DECISIONS AND RATIONALES

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

Hydrochloride/APAP 325mg #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 78-81.

Decision rationale: CA MTUS Chronic Pain Medical Treatment Guidelines do not support ongoing opioid treatment unless prescriptions are from a single practitioner and are taken as directed; are prescribed at the lowest possible dose; and unless there is ongoing review and documentation of pain relief, functional status, appropriate medication use, and side effects. In the latest progress report dated 7/24/2014, there was no evidence of functional improvement noted from the opioid regimen. Therefore, the request for Hydrocodone/APAP 325 #60 is not medically necessary.

Cyclobenzaprine Powder Compound 3gm: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Creams.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 25, 28, 111-113.

Decision rationale: CA MTUS Chronic Pain Medical Treatment Guidelines state that Ketoprofen, Lidocaine (in creams, lotion or gels), Capsaicin in anything greater than a 0.025% formulation, Baclofen, Boswellia Serrata Resin, and other muscle relaxants, and gabapentin and other antiepilepsy drugs are not recommended for topical applications. In addition, any compounded product that contains at least one drug (or drug class) that is not recommended is not recommended. In the latest progress report dated 7/28/2014 there was no clear rationale provided regarding the medical necessity of this topical compound. Although the patient is noted to have failed oral Gabapentin, there was no evidence of failure of Lyrica, which is also considered a 1st line oral analgesic. Therefore, the request for Flexeril powder compound 3gm is not medically necessary.

Cyclobenzaprine 7.5mg #90: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Muscle Relaxants.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 41-42.

Decision rationale: According to page 41 of the CA MTUS Chronic Pain Medical Treatment Guidelines, Cyclobenzaprine is recommended as an option, using a short course of therapy. The effect is greatest in the first 4 days of treatment, suggesting that shorter courses may be better. Treatment should be brief. There is also a post-op use. The addition of cyclobenzaprine to other agents is not recommended. In the latest progress report dated 7/24/2014, there was no evidence of an acute exacerbation of pain. Furthermore, this patient has been on oral Flexeril since at least 5/29/2014, and guidelines do not support long term use. Therefore, the request for Flexeril 7.5mg #90 is not medically necessary.

Gabapentin Powder Compound 3gm: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Creams.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 25, 28, 111-113.

Decision rationale: CA MTUS Chronic Pain Medical Treatment Guidelines state that Ketoprofen, Lidocaine (in creams, lotion or gels), Capsaicin in anything greater than a 0.025% formulation, Baclofen, Boswellia Serrata Resin, and other muscle relaxants, and Gabapentin and other antiepilepsy drugs are not recommended for topical applications. In addition, any compounded product that contains at least one drug (or drug class) that is not recommended is not recommended. In the latest progress report dated 7/28/2014 there was no clear rationale provided regarding the medical necessity of this topical compound. Although the patient is noted to have failed oral Gabapentin, there was no evidence of failure of Lyrica, which is also considered a 1st line oral analgesic. Therefore, the request for Gabapentin powder compound 3gm is not medically necessary.