

<b>Case Number:</b>	CM14-0170027		
<b>Date Assigned:</b>	10/20/2014	<b>Date of Injury:</b>	11/08/2002
<b>Decision Date:</b>	11/20/2014	<b>UR Denial Date:</b>	10/06/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/15/2014

### 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 is a 55-year-old female with an 11/8/02 date of injury. A specific mechanism of injury was not described. According to a progress report dated 9/23/14, the patient complained of bilateral lower back pain and left lower extremity pain. Due to her injury, lack of sleep, and possible thyroid issues, the patient suffers from severe anxiety and continues to report adequate relief with the use of Klonopin. Objective findings: restricted range of motion of lumbar spine, tenderness noted on both sides of paravertebral muscles. Diagnostic impression: status post decompression and discectomy L3-4 to the right as well as anterior-posterior fusion L3 to S1 (January 2004), intractable pain, bilateral lower extremity radiculitis, CRPS bilateral lower extremities, failed back syndrome, status post failed lumbar spinal cord stimulator trial (July 2012). Treatment to date: medication management, activity modification, spinal cord stimulator, surgery, physical therapy, acupuncture treatment, injections. A UR decision dated 10/6/14 modified the request for Klonopin 2mg #60 with 3 refills to Klonopin 2mg #36 with zero refills. The patient has utilized this medication since at least September 2012, which greatly exceeds the guideline recommendations. Medication tapering was initiated and continued in subsequent reviews and continued tapering is warranted.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Klonopin 2mg, #60 with 3 refills:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Weaning of Medications Section

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines 9792.24.2 Benzodiazepines Page(s): 24.

**Decision rationale:** CA MTUS Chronic Pain Medical Treatment Guidelines state that benzodiazepines range of action includes sedative/hypnotic, anxiolytic, anticonvulsant, and muscle relaxant. They are not recommended for long-term use because long-term efficacy is unproven and there is a risk of dependence. Most guidelines limit use to 4 weeks. However, in the present case, the documentation provided for review notes that this patient has been taking Klonopin since at least May of 2008, if not earlier. Guidelines do not recommend the long-term use of benzodiazepine medications. Tolerance to anxiolytic effects occurs within months and long-term use may actually increase anxiety. A more appropriate treatment for anxiety disorder is an antidepressant. There is no documentation that the provider has addressed the patient's anxiety disorder with antidepressant medications. Therefore, the request for Klonopin 2mg, #60 with 3 refills is not medically necessary.