

Case Number:	CM14-0020827		
Date Assigned:	04/30/2014	Date of Injury:	12/02/2005
Decision Date:	07/08/2014	UR Denial Date:	02/14/2014
Priority:	Standard	Application Received:	02/19/2014

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 December 2, 2005. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representations; earlier cervical fusion surgery; transfer of care to and from various providers in various specialties; and anxiolytic medications. In a Utilization Review Report of February 14, 2014, the claims administrator partially certified a request for Norco, Xanax, and Klonopin, reportedly for weaning purposes. Trigger point injections were apparently retrospectively denied. The claims administrator's decision was provided in an outlined format with little in the way of narrative commentary. The applicant's attorney subsequently appealed. On December 31, 2013, the applicant was described as reporting persistent complaints of neck pain. The applicant was attending massage therapy. The applicant reportedly had spasm and diminished range of motion with palpable tender points noted about the cervical region. Trigger points are performed. The applicant's medication list was not detailed. On August 22, 2013, the applicant was again given trigger point injections. Norco, Effexor, Xanax, and Klonopin were endorsed. Permanent work restrictions were renewed. It did not appear that the applicant was working, however.

IMR ISSUES, DECISIONS AND RATIONALES

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

RETROSPECTIVE BILATERAL CERVICOTRAPEZIAL RIDGE TRIGGER POINT INJECTIONS: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines TRIGGER POINT INJECTIONS.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Trigger Point Injections topic Page(s): 122.

Decision rationale: As noted on page 122 of the MTUS Chronic Pain Medical Treatment Guidelines, pursuit of repeat trigger point injections should be based on evidence of functional improvement with earlier blocks. In this case, however, there has been no compelling evidence of functional improvement with earlier trigger point injections. The applicant is off of work. The applicant remains highly reliant and highly dependent on various forms of medical treatment, including opioids such as Norco and multiple anxiolytics. Therefore, the trigger point injections in question were not medically necessary owing to the applicant's lack of functional improvement with earlier trigger point injections over the course of the claim.

NORCO: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines OPIOIDS FOR CHRONIC PAIN.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines When to Continue Opioids topic Page(s): 80.

Decision rationale: Norco is a short-acting opioid. As noted on page 80 of the MTUS Chronic Pain Medical Treatment Guidelines, the cardinal criteria for continuation of opioid therapy include evidence of successful return to work, improved functioning, and/or reduced pain achieved as a result of the same. In this case, however, the applicant is seemingly off of work. The applicant has permanent work restrictions which remain in place, unchanged, from visit to visit. The attending provider did not discuss medication efficacy on any recent progress notes provided. There was no clear discussion of how or if Norco has generated improvement in pain or function here. Therefore, the request was/is not medically necessary.

XANAX: Upheld

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions Page(s): 402.

Decision rationale: Xanax is a benzodiazepine anxiolytic. As noted in the MTUS-adopted ACOEM Guidelines in Chapter 15, page 402, usage of anxiolytics may be appropriate for brief periods, in case of overwhelming symptoms, so as to allow an applicant with the opportunity to recoup emotional resources. In this case, however, the attending provider is seemingly employing Xanax for chronic, long-term, and/or scheduled use purposes. There was no mention of an acute flare in emotions which would have supported usage of Xanax. Therefore, the request was not medically necessary.

KLONOPIN: Upheld

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions Page(s): 402.

Decision rationale: While the MTUS-adopted ACOEM Guidelines in Chapter 15, page 402 do acknowledge that usage of anxiolytics such as Klonopin may be appropriate for brief periods, in case of overwhelming symptoms, in this case, however, the applicant's issues are, quite clearly chronic. There is no evidence of any flare in mental health issues which would have supported usage of one anxiolytic medication such as Klonopin, let alone two separate anxiolytic medications, Klonopin and Xanax. Therefore, the request is not medically necessary.