MAXIMUS Federal Services

Case Number:	CM14-0022419		
Date Assigned:	02/26/2014	Date of Injury:	05/30/2010
Decision Date:	06/26/2014	UR Denial Date:	12/06/2013
Priority:	Standard	Application Received:	01/10/2014

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 Anesthesiology, and is licensed to practice in Texas. 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 patient is a 35 year old female who was injured on 5/2/2010. The diagnoses listed are migraine headaches, insomnia, muscle spasm, neck pain and shoulder pain. There is an associated history of irritability, memory loss, pancreatitis, and use of medical marijuana. On 10/23/2013, the patient complained of increasing pain, insomnia and decreasing range of motion despite chronic pain management but activities of daily living were maintained enabling the patient to care for 3 children. Cervical facet injections helped but trigger points injections did not help. The medications listed are Celebrex, Lidoderm, Oxycodone, Flexeril, Topamax, Cymbalta, Maxalt, and Silenor. A UDS on 10/22/2013 was positive for THC, which is a metabolite of marijuana. The patient admitted to using marijuana for sleep and pain relief. The use of Silenor and Flexeril is on hold because the patient was being worked up for pancreatitis. A Utilization Review decision was rendered on 12/6/2013 recommending non certification of Celebrex 200mg, Lidoderm 5% patch, Flexeril 10mg and Silenor.

IMR ISSUES, DECISIONS AND RATIONALES

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

CELEBREX 200MG: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: , CELEBREX (R),

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 67-73.

Decision rationale: The MTUS Chronic Pain Guidelines indicate the chronic use of NSAIDs can lead to cardiovascular, renal and gastrointestinal complications. It is recommended that the use of NSAIDs be limited to the lowest effective dose for the shortest period during acute injury or exacerbations of chronic musculoskelatal pain. This patient has been on NSAID treatment since 2010. The medical record did not show a significant reduction in pain. The patient is currently undergoing workup for pancreatitis. The potential risk from the chronic use of Celebrex is greater than the limited beneficial effects. Therefore, the request is not medically necessary and appropriate.

LIDODERM 5% PATCH: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: , LIDODERM (R) (LIDOCAINE PATCH),

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

Decision rationale: The MTUS Chronic Pain Guidelines indicate the chronic use of NSAIDs can lead to cardiovascular, renal and gastrointestinal complications. It is recommended that the use of NSAIDs be limited to the lowest effective dose for the shortest period during acute injury or exacerbations of chronic musculoskelatal pain. This patient has been on NSAID treatment since 2010. The medical record did not show a significant reduction in pain. The patient is currently undergoing workup for pancreatitis. The potential risk from the chronic use of Celebrex is greater than the limited beneficial effects. Therefore, the request is not medically necessary and appropriate.

SILENOR: 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 ODG

Decision rationale: The ODG recommends that the use of hypnotics be limited to 2-6 weeks to decrease the risks of habituation, dependency and addiction. The patient should be educated on proper sleep hygiene. The treatment of coexisting pain, depression and anxiety should be optimized. On 11/26/2013, the patient continued to complain of insomnia. She was sleeping 4-6 hours a night on average. The patient complained of irritability and memory loss which could be worsened by the use of Silenor. The records indicate that the use of Silenor was on hold because the patient was being worked up for pancreatitis. The patient did indicate that the use of medical marijuana was to treat the insomnia. The request is not medically necessary and appropriate.

FLEXERIL 10MG, QUANTITY 60: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: , CYCLOBENZAPRINE (FLEXERIL (R)),

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

Decision rationale: The MTUS Chronic Pain Guidelines address the use of antispasmodics and muscle relaxants in the treatment of muscle spasms associated with chronic pain. It is recommended that non-sedating muscle relaxants be used with caution as a second-line option for short term treatment of acute exacerbations of symptoms that are nonresponsive to standard treatment with NSAIDs, physical therapy and exercise. The short term course of treatment should be limited to 2-3 weeks to minimize the risks of dependency, sedation, and addiction associated with the chronic use of sedating muscle relaxants. The records indicate that the patient had been on chronic muscle relaxant treatment. The patient had continued to complain of muscle spasm and decreased range of motion despite the chronic use of Flexeril. The use of Flexeril was recently placed on hold because the patient was undergoing pancreatitis work up. The request is not medically necessary and appropriate.