

Case Number:	CM14-0023867		
Date Assigned:	07/02/2014	Date of Injury:	01/02/2004
Decision Date:	08/20/2014	UR Denial Date:	02/21/2014
Priority:	Standard	Application Received:	02/25/2014

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 knee pain reportedly associated with an industrial injury of January 2, 2004. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representation; topical compounds; a knee brace; a walker; and apparent earlier failed knee surgery. In a Utilization Review Report dated February 21, 2014, the claims administrator approved a request for Norco while denying several topical compounded drugs. The applicant's attorney subsequently appealed. In a December 11, 2013 progress note, handwritten, somewhat difficult to follow, the applicant was described as reporting constant complaints of neck, wrist, shoulder, and knee pain, 6-9/10. Trigger point injection was apparently sought. Knee surgery was recommended. The applicant's medication list was not clearly stated. On December 3, 2013, the applicant was issued prescriptions for Norco and several topical compounded drugs. The applicant was reporting 9/10 knee pain. A knee brace was also dispensed. The applicant's work status was not provided.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 JAR OF TGHOT 180 GRAMS (TRAMADOL 8%/GABAPENTIN 10 % MENTHOL 2 % CAMPHOR 2 % CAPSAICIN 0.05%): Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics topic Page(s): 11-113.

Decision rationale: One of the ingredients in the compound is gabapentin. However, page 113 of the MTUS Chronic Medical Treatment Guidelines notes that gabapentin is specifically not recommended for topical compound formulation purposes. This results in the entire compound's carrying an unfavorable recommendation per page 111 of the MTUS Chronic Medical Treatment Guidelines. It is further noted that the applicant's ongoing usage of oral Norco effectively obviates the need for the largely experimental agent. For all of the stated reasons, then, the request is not medically necessary.

1 JAR OF FLURFLEX 180 GRAMS (FLURBIPROFEN 10 %/ CYCLOBENZAPRINE 10 %): Upheld

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

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

Decision rationale: One of the ingredients in the compounds is cyclobenzaprine, a muscle relaxant. However, as noted on page 113 of the MTUS Chronic Medical Treatment Guidelines, muscles relaxants are not recommended for topical compound formulation purposes. Since one or more ingredients in the compound is not recommended, the entire compound is considered not recommended, per page 111 of the MTUS Chronic Medical Treatment Guidelines. It is further noted that the applicant's ongoing usage of oral Norco effectively obviates the need for the topical compound in question. Therefore, the request is not medically necessary.