

Case Number:	CM14-0073414		
Date Assigned:	07/16/2014	Date of Injury:	09/08/2007
Decision Date:	09/19/2014	UR Denial Date:	05/15/2014
Priority:	Standard	Application Received:	05/20/2014

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 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 injured worker is a represented [REDACTED] employee who has a filed a claim for chronic thumb, wrist, hand, shoulder, neck, and low back pain reportedly associated with an industrial injury of September 8, 2007. Thus far, the injured worker has been treated with the following: Analgesic medications; carpal tunnel release surgery and thumb arthroplasty surgery on August 1, 2013; unspecified amounts of physical therapy over the life of the life of the claim; unspecified amounts of acupuncture; Botox injections; massage therapy; and unspecified amounts of aquatic therapy. In a utilization review report dated May 15, 2014, the claims administrator denied a request for Lidoderm patches. The injured worker attorney subsequently appealed. In a May 22, 2014 progress note, the injured worker, a former janitor and cashier, was described as presenting with a variety of ankle, leg, foot, hand, neck, knee, and facial pain complaints. The injured worker was given diagnosis of knee arthritis and complex regional pain syndrome. It was stated that the injured worker was using Celebrex owing to GI side effects to other NSAIDs. The injured worker was asked to continue Lidoderm patches. There was no discussion of medication efficacy. On February 4, 2014, the injured worker reported multifocal pain complains. A nurse case manager accompanied the injured worker. The injured worker had experiencing issues with opioid withdrawal owing to failure to receive buprenorphine in a timely manner. The injured worker was attending a gym. The injured worker was having issues with depression, it was stated. Medications included Baclofen, Celebrex, Cymbalta, Lidoderm, Buprenorphine, Norco, Oxycodone, and Lipitor. The attending provider sought authorization for transportation to and from office visits, a gym program, and for assistance with errands. The injured worker was described as permanent and stationary, with permanent disability. The injured worker was not working.

IMR ISSUES, DECISIONS AND RATIONALES

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

Lidoderm 5% patch #80 , refills: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Lidoderm (lidocaine patch).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Lidocaine Page(s): 112.

Decision rationale: The MTUS Chronic Pain Medical Treatment Guidelines, state that topical lidocaine is indicated in the treatment of localized peripheral pain or neuropathic pain in applicants in whom there has been a trial first line therapy with antidepressants and/or anticonvulsants. In this case, however, the applicant's ongoing usage of Cymbalta, an antidepressant adjuvant medication, effectively obviates the need for the Lidoderm patches at issue. Therefore, the request for Lidoderm 5% patch #80, refills is not medically necessary and appropriate.