

Case Number:	CM14-0143972		
Date Assigned:	09/12/2014	Date of Injury:	09/18/1991
Decision Date:	04/16/2015	UR Denial Date:	08/20/2014
Priority:	Standard	Application Received:	09/05/2014

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: California

Certification(s)/Specialty: Physical Medicine & Rehabilitation

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 57-year-old female, with a reported date of injury of 09/18/1991. The diagnoses include depression and anxiety. Treatments have included oral medications. The progress report dated 07/25/2014 indicates that the injured worker stated that the current medication regimen continued to be helpful in increased her daily function without causing intolerable side effects. There were no changes in her general health in the past month. The injured worker complained of right leg pain, bilateral buttocks pain, bilateral hip pain, and bilateral low back pain. The injured worker can tolerate a pain level of 4 out of 10. The injured worker complained of anxiety and depression. The treating physician requested Xanax 0.5mg #30, ½ tablet two times a day as needed for anxiety.

IMR ISSUES, DECISIONS AND RATIONALES

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

Xanax (alprazolam) 0.5mg tabs: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Workers Compensation Drug Formulary, Goodman and Gilman's The Pharmacological Basis of Therapeutics 12th ed. McGraw Hill, 2010, Physician's Desk reference, 68th ed., Epocrates Online, and AMDD Agency Medical Director's Group Dose Calculator.

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

Decision rationale: The patient presents with right leg, bilateral buttocks, bilateral hips, and bilateral lower back pain rated 4/10. The patient's date of injury is 09/18/91. Patient is status post L4-5 anterior/posterior fusion and laminectomy 1999, with hardware removal in 2002. The request is for XANAX - ALPRAZOLAM - 0.5MG TABS. The RFA is dated 08/13/14. Physical examination dated 08/13/14 does not demonstrate any significant physical findings other than report of "abnormal" findings on palpation of the lumbosacral spine. Medication review states: "Current medication regimen continued to be helpful in increased her daily function without causing intolerable side effects." The patient is currently prescribed Cymbalta, Robaxin, Flector, Colace, Lidoderm, Voltaren gel, Xanax, Oxycodone, and Kadian. Diagnostic imaging was not included. Patient's current work status is not provided. MTUS Chronic Pain Medical Treatment Guidelines, page 24 states, "benzodiazepines are not recommended for long-term use because long-term efficacies are unproven and there is a risk of dependence." In regard to the request for a continuing prescription of Xanax for this patient's anxiety, the duration of therapy exceeds guidelines. While this patient presents with significant anxiety secondary to chronic pain, the requested 30 tablet prescription does not imply short duration therapy. Furthermore, records indicate that this patient has been receiving Xanax for anxiety since at least 05/30/14. Such a long course of treatment with Benzodiazepines carries a risk of dependence and loss of efficacy and is not supported by guidelines. Therefore, the request IS NOT medically necessary.