

Case Number:	CM14-0186018		
Date Assigned:	11/13/2014	Date of Injury:	12/12/2012
Decision Date:	01/07/2015	UR Denial Date:	10/09/2014
Priority:	Standard	Application Received:	11/07/2014

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 December 12, 2012. In a Utilization Review Report dated October 9, 2014, the claims administrator failed to approve a request for Senna, a laxative agent, invoking page 77 of the MTUS Chronic Pain Medical Treatment Guidelines. It was stated that the decision was based on a progress note of October 1, 2014. The applicant's attorney subsequently appealed. In an October 5, 2014 progress note, the applicant reported ongoing complaints of knee pain. The applicant was presently receiving acupuncture. The applicant was smoking. The applicant was using 10 tablets of hydrocodone daily. Acupuncture was performed. A variety of dietary supplements were endorsed, including Theramine, Trepidone, and Sentra. Various other medications, including Norco, glucosamine, topical ketoprofen, Prilosec, and fenoprofen were endorsed. In a separate note dated October 1, 2014, the applicant was asked to continue permanent work restrictions. The applicant was asked to continue Senna, Prilosec, Sentra, Theramine, ketoprofen, Cidaflex, and lidocaine. Senna was spelt "Sena" on this occasion. In the applicant's attorney's appeal letter dated November 7, 2014, the applicant's attorney spelled Senna as 'Senna.' In the Request for Authorization (RFA) form dated October 1, 2014, Senna was spelled as 'Senna.'

IMR ISSUES, DECISIONS AND RATIONALES

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

3 Senna 400mg #30 BID Refills: 3 Related to bilateral Knee Symptoms, as outpatient:
Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 77.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Initiating Therapy section Page(s): 77.

Decision rationale: As noted on page 77 of the MTUS Chronic Pain Medical Treatment Guidelines, prophylactic initiation of constipation is indicated in applicants using opioids. Here, the applicant was/is using Norco, an opioid agent, at a rate of 10 tablets daily. Concurrent provision with a laxative, Senna, was indicated and compatible with page 77 of the MTUS Chronic Pain Medical Treatment Guidelines. Therefore, the request was medically necessary.