MAXIMUS Federal Services

Case Number:	CM14-0191811		
Date Assigned:	11/25/2014	Date of Injury:	08/13/2012
Decision Date:	01/12/2015	UR Denial Date:	10/24/2014
Priority:	Standard	Application Received:	11/24/2014

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 Physical Medicine and Rehabilitation, has a subspecialty in Neuromuscular Medicine and is licensed to practice in Maryland. 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 66 year old male with a work injury dated 8/13/12. The diagnoses include impingement syndrome; tendinitis; rotator cuff tear of the right shoulder; possible rotator cuff tear of the left shoulder and sleep difficulties. Under consideration is a request for the medical necessity of Nabumetone 500 mg #60. There is an 11/17/14 document that states that the patient has right shoulder continued pain. The patient has left shoulder compensatory pain (denied by insurance). The patient has continued pain with movement. There is left side of the chest pain traveling into the shoulder with numbness and tingling down both arms and hands. He has insomnia and depression. He feels that his condition has remained the same. There is increased pain with activities and difficulties completing activities of daily living. He has not re-injured himself in any way. His medications are being denied. Over the counter medications provide him minimal relief. He does not feel that he can perform his regular job duties at this time due to limited motion. The physical exam findings reveal right shoulder tenderness and pain about the tip of the acromion and rotator cuff with abduction and elevation of the right side limited to 110 degrees and pain to internal and external rotation. The left shoulder showed abduction and elevation up to 120 degrees also with pain with internal and external rotation. The treatment plan includes to remain off of work. The patient had a qualified medical exam on 5/30/14 and report is pending. The patient had a right shoulder MRI and report is pending. There is a recommendation for a right shoulder trigger point injection. The left shoulder MRI was recommended. This body part was denied by insurance. The patient is to continue Nabumetome and home exercises. The documentation indicates that the patient has had shoulder cortisone injections, physical therapy and acupuncture.

IMR ISSUES, DECISIONS AND RATIONALES

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

Nabumetone 500mg Qty: 60.00: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs (non-steroidal anti-inflammatory drugs) Page(s): 67-68, 72-.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs (non-steroidal anti-inflammatory drugs) Page(s): 67-73.

Decision rationale: The MTUS Guidelines state that NSAIDS are recommended as an option for short-term symptomatic relief at the lowest dose for osteoarthritis, acute exacerbations of chronic pain, and chronic low back pain. NSAIDs can increase blood pressure by an average of 5 to 6 mm in patients with hypertension and can cause fluid retention, edema, and rarely, congestive heart failure. Additionally NSAIDS have the associated risk of adverse cardiovascular events, including, MI, stroke, and new onset or worsening of pre-existing hypertension. NSAIDs can cause ulcers and bleeding in the stomach and intestines at any time during treatment. Borderline elevations of one or more liver enzymes may occur in up to 15% of patients taking NSAIDs. The use of NSAIDs may compromise renal function. The MTUS states that NSAIDS are generally recommended at the lowest effective dose for all NSAIDs, for the shortest duration of time consistent with the individual patient treatment goals. The documentation indicates that the patient has been on Nabumetome long term without significant evidence of functional improvement. Therefore, the request is not medically necessary.