

Case Number:	CM14-0194665		
Date Assigned:	12/02/2014	Date of Injury:	11/26/2000
Decision Date:	01/20/2015	UR Denial Date:	11/10/2014
Priority:	Standard	Application Received:	11/20/2014

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 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 low back pain reportedly associated with an industrial injury of November 26, 2000. In a Utilization Review Report dated November 10, 2014, the claims administrator failed to approve a request for Celebrex. The claims administrator denied the request for Celebrex on the grounds that the applicant had allegedly failed to improve with the same. The claims administrator did not incorporate any guidelines into its rationale, however. The applicant's attorney subsequently appealed, on November 16, 2014. The applicant and/or applicant's attorney stated that the applicant was seen on November 13, 2013 and further stated that they believed that the applicant had demonstrated an improvement in function achieved as a result of ongoing Celebrex usage. In an earlier note dated July 15, 2014, the applicant reported ongoing complaints of low back and bilateral lower extremity pain. The applicant was working, it was acknowledged. The applicant was using Norco and Celebrex. Flexeril was added for reported flare in pain. In a November 16, 2014 progress note, the applicant was again returned to regular duty work, despite ongoing complaints of low back pain precipitated as a result of wearing up to 50 pounds gear. The applicant stated that his medications would help for up to three and half hours continuously. The applicant was asked to add OxyContin for pain relief. The applicant was also employing Norco for pain relief. Lumbar MRI imaging was sought. On October 14, 2014, the applicant was given prescriptions for Norco and Celebrex. The applicant was reportedly sleeping better. The applicant's pain medications were helping. It was stated that the applicant was in the process of getting a promotion. The applicant was, once again, returned to regular duty work. There was no mention of Celebrex on this occasion. On November 13, 2014, the applicant was given prescriptions for OxyContin and Norco. It was stated that the applicant was deriving benefit

from ongoing Celebrex usage, which the applicant had reportedly been using for 10 years. The applicant was, once again, returned to regular duty work.

IMR ISSUES, DECISIONS AND RATIONALES

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

Celebrex 200mg #180: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Anti-inflammatory Medications Page(s): 22.

Decision rationale: While page 22 of the MTUS Chronic Pain Medical Treatment Guidelines does acknowledge that COX-2 inhibitors such as Celebrex can be considered if an applicant has a risk of GI complications, page 22 of the MTUS Chronic Pain Medical Treatment Guidelines notes that COX-2 inhibitors such as Celebrex are not recommended for the majority of applicants. In this case, the attending provider's handwritten progress notes, while establishing the presence of functional benefit and/or functional improvement with ongoing medication consumption, including ongoing Celebrex consumption, failed to establish the presence of any GI complications and/or history of previous adverse GI issues which would compel provision of Celebrex in favor of non-selective NSAIDs such as Motrin or naproxen. Therefore, the request was not medically necessary.