

Case Number:	CM14-0088126		
Date Assigned:	07/23/2014	Date of Injury:	11/14/1987
Decision Date:	05/22/2015	UR Denial Date:	05/12/2014
Priority:	Standard	Application Received:	06/11/2014

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: Texas, New York, California
 Certification(s)/Specialty: Preventive Medicine, Occupational Medicine

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 58-year-old who has filed a claim for chronic low back pain (LBP) reportedly associated with an industrial injury of November 14, 1987. In a Utilization Review report dated May 12, 2014, the claims administrator failed to approve a request for Vicoprofen. The claims administrator referenced progress notes of March 24, 2014 and April 2, 2014 in its determination. The applicant personally appealed, in a letter dated June 11, 2014. In an associated letter dated June 10, 2014, the applicant stated that Vicoprofen had been helpful in attenuating her pain complaints. The applicant also noted that she had had difficulty finding a treating provider after having moved from [REDACTED] [REDACTED]. On August 4, 2014, the applicant reported ongoing complaints of low back pain radiating into the right leg. The applicant was using Vicoprofen anywhere from half capsule a day to two capsules a day, it was acknowledged. Prolonged sitting, standing, and walking all remained problematic, however, the applicant acknowledged. The applicant had completed recent acupuncture. The applicant's BMI was 27. A piriformis injection was performed while Vicoprofen was renewed. On October 23, 2014, the applicant reported ongoing complaints of low back pain radiating into right leg. The applicant had completed 8 of 12-week sessions of acupuncture. The applicant was again described as using Vicoprofen anywhere from a half capsule to two capsules daily. The applicant stated that Vicoprofen was decreasing her pain by 60% but then acknowledged that sitting, standing, and walking remained problematic. Sixty tablets of Vicoprofen were refilled. Once again, the applicant's work status was not detailed, although it did not appear that the applicant was working.

IMR ISSUES, DECISIONS AND RATIONALES

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

Vicoprofen 7.5/200mg, #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Hydrocodone/Ibuprofen.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Hydrocodone/Ibuprofen (Vicoprofen; generic available) Page(s): 92.

Decision rationale: No, the request for Vicoprofen was not medically necessary, medically appropriate, or indicated here. As noted on page 92 of the MTUS Chronic Pain Medical Treatment Guidelines, Vicoprofen is recommended for 'short-term use only,' for generally less than 10 days. Here, the renewal request for Vicoprofen, thus, in effect, represented treatment in excess of MTUS parameters. The applicant had been using Vicoprofen for a minimum of several months as of the date in question. The attending provider failed to furnish a compelling rationale for continued usage of Vicoprofen in the face of the unfavorable MTUS position on the same. Therefore, the request was not medically necessary.