

Case Number:	CM15-0002625		
Date Assigned:	01/13/2015	Date of Injury:	06/11/1998
Decision Date:	03/09/2015	UR Denial Date:	01/05/2015
Priority:	Standard	Application Received:	01/06/2015

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: Arizona, California
 Certification(s)/Specialty: Family Practice

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 53 year old male who suffered a work related injury on 06/11/98. Per the physician notes from 12/11/4 he walks with the assistance of a cane and has decreased sensation to light touch and pinprick over the feet bilaterally. Diagnosis include lumbar fusion at L4-S1, coblation nucleoplasty at L5--S1, severe irritable syndrome secondary to lumbar surgery, and TMJ. The treatment plan consisted of Tramadol, Norco, Valium, Gralise, and, Zanaflex and Zoloft. On 01/05/15 the claims administrator non-certified the Valium and Zanaflex. The Valium was non-certified per MTUS guidelines as the long term efficacy is unproven. The Zanaflex was non-certified as per the MTUS guidelines long term use of muscle relaxants is not recommended. The non-certified treatments were subsequently appealed for Independent Medical Review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective Valium 5mg #60, DOS: 12/11/14: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Benzodiazepines Page(s): 23.

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

Decision rationale: According to the Chronic Pain Medical Treatment Guidelines , Benzodiazepines are not recommended for long-term use because its efficacy is unproven and there is a risk of addiction. Most guidelines limit its use to 4 weeks and its range of action include: sedation, anxiolytic, anticonvulsant and muscle relaxant. In this case, the claimant had been on Valium for over a year. The claimant had been on Zoloft which assists with anxiety and Zanaflex, a muscle relaxant. Long-term and continued use of Valium for anxiety or muscle relaxation is not medically necessary.

Retrospective Zanaflex 4mg #30, DOS: 12/11/14: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Muscle relaxants for pain Page(s): 64-66.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Muscle Relaxants Page(s): 68.

Decision rationale: According to the MTUS guidelines, Zanaflex is a centrally acting alpha₂-adrenergic agonist that is FDA approved for management of spasticity; unlabeled use for low back pain. Eight studies have demonstrated efficacy for low back pain. It falls under the category of muscle relaxants. According to the MTUS guidelines, muscle relaxants are to be used with caution as a second-line option for short-term treatment of acute exacerbations in patients with chronic low back pain. Muscle relaxants may be effective in reducing pain and muscle tension, and increasing mobility. However, in most low back pain cases, they show no benefit beyond NSAIDs in pain and overall improvement. Also there is no additional benefit shown in combination with NSAIDs. Efficacy appears to diminish over time, and prolonged use of some medications in this class may lead to dependence. In this case, the claimant had been on Zanaflex for over a year. Continued and chronic use of muscle relaxants /antispasmodics is not medically necessary. Therefore Zanaflex is not medically necessary.