

Case Number:	CM15-0004284		
Date Assigned:	02/03/2015	Date of Injury:	01/23/2013
Decision Date:	04/10/2015	UR Denial Date:	12/26/2014
Priority:	Standard	Application Received:	01/08/2015

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: California
 Certification(s)/Specialty: Physical Medicine & Rehabilitation

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 58 year old female, who sustained an industrial injury on 1/23/13. She has reported pain in the neck, hips and back. The diagnoses have included neck sprain, hip sprain and back sprain. Treatment to date has included physical therapy, diagnostic studies and oral medications. As of the PR2 dated 11/19/14, the injured worker reported pain in the back, bilateral wrists and hands. She indicated that the pain is decreased with pain medication. The treating physician requested a podiatrist consultation, an orthopedic consultation and Capsaicin #6. On 12/26/14 Utilization Review non-certified a request for a podiatrist consultation, an orthopedic consultation and Capsaicin #6. The utilization review physician cited the ACOEM guidelines and medical necessity. On 1/8/15, the injured worker submitted an application for IMR for review of a podiatrist consultation, an orthopedic consultation and Capsaicin #6.

IMR ISSUES, DECISIONS AND RATIONALES

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

Capsaicin #6: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Section.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113.

Decision rationale: According to the 11/19/2014 report, this patient presents with neck, hips and back pain. The current request is for Capsaicin #6. The request for authorization is unknown. The patient's work status is "remain off work." Regarding Capsaicin, MTUS guidelines state "There have been no studies of a 0.0375% formulation of capsaicin and there is no current indication that this increase over a 0.025% formulation would provide any further efficacy. For Capsaicin 0.025%, MTUS states capsaicin has benefit for patients with osteoarthritis." In reviewing the provided report, the treating physician does not indicate that the patient presents with osteoarthritis/ fibromyalgia for which Topical Analgesics are indicated. In this case, the treating physician requested Capsaicin #6 without noting the formulation description and the patient does not meet the indication for the topical medication as she does not present with osteoarthritis/ fibromyalgia. Furthermore, the treating physician does not indicate whether or not this topical has been helpful in any way for pain reduction and functional improvement. The request IS NOT medically necessary.

One podiatrist consultation: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 362, 374 - 375.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Practice Guidelines, 2nd Edition (2004), Independent medical examination and consultations. Ch:7 page 127.

Decision rationale: According to the 11/19/2014 report, this patient presents with neck, hips and back pain. The current request is for one podiatrist consultation. The ACOEM guidelines, chapter 7, page 127 state that the occupational health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial factors are present, or when the plan or course of care may benefit from additional expertise. A referral may be for consultation to aid in the diagnosis, prognosis, therapeutic management, determination of medical stability, and permanent residual loss and/or the examinee's fitness for return to work. In this case, the treating physician does not explain why a podiatrist consultation is needed. There is no mention of any foot issues such as pain, positive examination findings and how the patient is struggling with chronic pain to benefit from podiatrist consultation. The request IS NOT medically necessary.

One orthopedic consultation: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 305.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Practice Guidelines, 2nd Edition (2004), Independent medical examination and consultations. Ch:7 page 127.

Decision rationale: According to the 11/19/2014 report, this patient presents with neck, hips and back pain. The current request is for one orthopedic consultation. The request for authorization is unknown. The patient's work status is "remain off work." The ACOEM guidelines, chapter 7, page 127 state that the occupational health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial factors are present, or when the plan or course of care may benefit from additional expertise. A referral may be for consultation to aid in the diagnosis, prognosis, therapeutic management, determination of medical stability, and permanent residual loss and/or the examinee's fitness for return to work. In this case, the treating physician does not explain why one orthopedic consultation is needed. There is no mention of any orthopedic issues and how the patient is struggling with chronic pain to benefit from orthopedic consultation. The request IS NOT medically necessary.