MAXIMUS Federal Services

| Case Number: | CM15-0004441 | | |
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| Date Assigned: | 01/15/2015 | Date of Injury: | 07/20/2002 |
| Decision Date: | 03/16/2015 | UR Denial Date: | 12/30/2014 |
| 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 53 year old female, who sustained an industrial injury on July 20, 2002. She has reported neck injury. The diagnoses have included depressive disorder, cervical spine stenosis, and cervical spine radiculitis. Treatment to date has included neck surgery, physical therapy, home exercise program, radiological imaging, and medications. Currently, the IW complains of continued complaint of neck pain with radiation down the left arm into the left hand. The records indicate the injured worker has been prescribed Xanax since at least August 13, 2014. The current physical findings on December 9, 2014, are noted as diminished sensation throughout the left arm, cervical range of motion flexion 50 degrees, extension 20 degrees, right rotation 50 degrees, and left rotation is 50 degrees. On December 30, 2014, Utilization Review provided modified certification of Xanax 1 mg, quantity #15, based on MTUS, Chronic Pain Medical Treatment, and ODG guidelines. On January 5, 2015, the injured worker submitted an application for IMR for review of Xanax 1 mg, quantity #45.

## IMR ISSUES, DECISIONS AND RATIONALES

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

**Xanax 1 mg, sixty count:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

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

**Decision rationale:** The patient presents with residual unrated neck pain following recent cervical fusion surgery on 06/25/14. Patient reports depression, frustration, bouts of crying, and hopelessness secondary to loss of function and lack of progress. The patient's date of injury is 07/20/02. Patient is status post anterior cervical discectomy and fusion from C4-C7 levels on 06/25/14. The request is for XANAX 1MG, SIXTY COUNT. The RFA is dated 12/23/14. Physical examination dated 12/12/14 reveals weakness along the left ulnar nerve distribution, positive Tinel's sign left, positive Phalen's sign left. As of 12/09/14 progress report, patient is prescribed Xanax, Butrans, Gabapentin, Flexeril, and Percocet. Diagnostic imaging was not included. Patient is advised to remain off work until next visit in progress note dated 12/12/14.MTUS Chronic Pain Medical Treatment Guidelines, page 24 states, "benzodiazepines are not recommended for long-term use because long-term efficacies are unproven and there is a risk of dependence."In regards to the request for a continuing prescription of Xanax for this patient's anxiety, the duration of therapy exceeds guidelines. While this patient presents with significant medical and psychiatric complaints, the requested 60 tablet prescription does not imply short duration therapy. Furthermore, records indicate that this patient has been receiving Xanax for anxiety since at least 08/13/14. Such a long course of treatment with Benzodiazepines carries a risk of dependence and loss of efficacy, is not supported by guidelines. Therefore, the request IS NOT medically necessary.