

Case Number:	CM15-0135743		
Date Assigned:	07/23/2015	Date of Injury:	08/19/2002
Decision Date:	09/02/2015	UR Denial Date:	06/23/2015
Priority:	Standard	Application Received:	07/14/2015

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: 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 [REDACTED] beneficiary who has filed a claim for chronic neck and shoulder pain reportedly associated with an industrial injury of August 19, 2002. In a Utilization Review report dated June 23, 2015, the claims administrator failed to approve requests for Xanax, Robaxin, and acupuncture. The claims administrator referenced an RFA form of June 18, 2015 and an associated progress note of June 15, 2015 in its determination. The applicant's attorney subsequently appealed. On said June 18, 2015 RFA form, Xanax, Robaxin were sought, and 12 additional sessions of acupuncture were sought. In an associated progress note dated June 15, 2015, the applicant reported having completed six weeks of acupuncture treatments. Ongoing complaints of shoulder pain were noted, 6/10 without medications versus 2/10 with medications. The attending provider acknowledged that activities of daily living to include bending, standing, and lifting remained problematic. It was suggested that the applicant was working modified duty as an agronomist in the Social History section of the note. Additional acupuncture was sought while Xanax and Robaxin were apparently renewed. The applicant was given a rather proscriptive 5-pound lifting limitation at the bottom of the report, it was reported. The applicant's psychiatric review of systems was notable for depression, anxiety, and insomnia. It was suggested (but not clearly stated) that Xanax was being employed on a daily basis for anxiolytic effect. On May 4, 2015, the applicant was given the same, unchanged 5-pound lifting limitation. It was suggested that the applicant had developed mild depression. The applicant was asked to employ Xanax on a daily basis on that date. It was again suggested in the Social History section of the note that the applicant's

employer was able to accommodate the applicant's limitations. The applicant's medication list was not clearly stated but apparently included tramadol and Xanax, it was reported on this date.

IMR ISSUES, DECISIONS AND RATIONALES

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

Xanax 1mg #30: Upheld

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions Page(s): 402.

Decision rationale: No, the request for Xanax, a benzodiazepine anxiolytic, was not medically necessary, medically appropriate, or indicated here. While the MTUS Guideline in ACOEM Chapter 15, page 402 does acknowledge that anxiolytics such as Xanax may be appropriate for brief periods, in cases of overwhelming symptoms, here, however, the attending provider seemingly suggested on progress notes of June 15, 2015 and May 4, 2015 that the applicant was using Xanax on a daily basis, for issues with anxiety, depression, and insomnia. Such usage, however, represents treatment above and beyond the short-term role for which anxiolytics are espoused, per the MTUS Guideline in ACOEM Chapter 15, page 402. The attending provider failed to furnish a clear or compelling rationale for continued usage of Xanax in the face of the unfavorable ACOEM position on the same. Therefore, the request was not medically necessary.

Robaxin 500mg #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Muscle relaxants (for pain). Decision based on Non-MTUS Citation Official Disability Guidelines, Pain Procedure Summary.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Muscle relaxants (for pain) Page(s): 63.

Decision rationale: Similarly, the request for Robaxin, a muscle relaxant, was likewise not medically necessary, medically appropriate, or indicated here. While page 63 of the MTUS Chronic Pain Medical Treatment Guidelines does acknowledge that muscle relaxants such as Robaxin are recommended with caution as second-line option for short-term treatment of acute exacerbations of chronic pain, here, however, the 60-tablet supply of Robaxin at issue implies chronic, long-term, and/or twice daily usage of the same, i.e., usage in excess of the short-term role for which muscle relaxants are espoused, per page 63 of the MTUS Chronic Pain Medical Treatment Guidelines. Therefore, the request was not medically necessary.

12 sessions of acupuncture, cervical spine: Upheld

Claims Administrator guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: Finally, the request for 12 additional sessions of acupuncture was likewise not medically necessary, medically appropriate, or indicated here. The request in question was framed as a renewal or extension request for acupuncture, the attending provider acknowledged on his June 18, 2015 RFA form. It was suggested that the applicant had had six weeks in acupuncture treatments in 2015 alone, the treating provider reported on June 15, 2015. While the Acupuncture Medical Treatment Guidelines in MTUS 9792.24.1d acknowledge that acupuncture treatments may be extended if there is evidence of functional improvement as defined in section 9792.20e, here, however, it did not appear that the applicant had in fact demonstrated functional improvement in terms of the parameters established in MTUS 9792.20e with the six prior sessions of acupuncture. The same, unchanged, rather proscriptive 5-pound lifting limitation was renewed on June 15, 2015. The 5-pound lifting limitation was unchanged, when contrasted against an earlier note dated May 4, 2015. The applicant remained dependent on a variety of analgesic and anxiolytic medications to include tramadol, Robaxin, and Xanax. All of the foregoing, taken together, suggested a lack of functional improvement as defined in MTUS 9792.20e, despite receipt of six prior acupuncture treatments. Therefore, the request was not medically necessary.