

Case Number:	CM15-0147186		
Date Assigned:	08/10/2015	Date of Injury:	03/28/2002
Decision Date:	09/29/2015	UR Denial Date:	07/06/2015
Priority:	Standard	Application Received:	07/29/2015

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 low back pain (LBP) reportedly associated with an industrial injury of July 6, 2015. In a Utilization Review report dated July 6, 2015, the claims administrator failed to approve requests for Colace and Senokot. The claims administrator referenced a June 24, 2015 progress note in its determination. The applicant's attorney subsequently appealed. On June 24, 2015, the applicant reported multifocal complaints of back, hip, and leg pain. The applicant was using a cane to move about. The applicant was not working and was receiving Social Security Disability Insurance (SSDI) benefits in addition to Workers' Compensation indemnity benefits. The applicant was seeing a psychologist, it was reported. Norco, Zanaflex, Neurontin, naproxen, Prilosec, and Effexor were renewed. The applicant had developed derivative issues with depression, it was reported in several sections of the note. Colace and senna were endorsed for issues associated with opioid-induced constipation.

IMR ISSUES, DECISIONS AND RATIONALES

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

Colace 250mg #60: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines, Pain Chronic.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines 3) Initiating Therapy Page(s): 77.

Decision rationale: Yes, the request for Colace, a stool softener/laxative, was medically necessary, medically appropriate, and indicated here. As noted on page 77 of the MTUS Chronic Pain Medical Treatment Guidelines, the prophylactic treatment of constipation should be initiated in applicants using opioids. Here, the applicant was in fact using Norco, an opioid agent and had experienced actual symptoms of constipation in conjunction with the same, the prescribing provider reported on June 24, 2015. Concomitant usage of Colace, a stool softener/laxative, thus, was indicated in conjunction with the same. Therefore, the request was medically necessary.

Senokot #60: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids. Decision based on Non-MTUS Citation Official Disability Guidelines, Pain Chronic.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines 3) Initiating Therapy Page(s): 77.

Decision rationale: Similarly, the request for Senokot, a laxative agent, was medically necessary, medically appropriate, and indicated here. As noted on page 77 of the MTUS Chronic Pain Medical Treatment Guidelines, prophylactic treatment of constipation should be initiated in applicants using opioids. Here, the applicant had reported actual symptoms of constipation in conjunction with Norco usage, it was reported on a June 24, 2015 progress note at issue. Concomitant usage of Senokot, a laxative agent, thus, was indicated. Therefore, the request was medically necessary.