

Case Number:	CM15-0182912		
Date Assigned:	09/23/2015	Date of Injury:	04/15/2012
Decision Date:	11/06/2015	UR Denial Date:	08/31/2015
Priority:	Standard	Application Received:	09/17/2015

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 65-year-old who has filed a claim for chronic ankle pain reportedly associated with an industrial injury of April 15, 2012. In a Utilization Review report dated August 31, 2015, the claims administrator failed to approve requests for Flexeril, Xanax, and Medrox. An August 18, 2015 office visit and an associated RFA form of the same date were referenced in the determination. The applicant's attorney subsequently appealed. On September 15, 2015, the applicant reported highly variable 3-8/10 ankle, finger, and hand pain with associated upper extremity paresthesias. The applicant's medications attenuated her complaints to some extent, it was acknowledged but did not entirely ameliorate the same. The applicant was given prescriptions for Voltaren gel, Cymbalta, and Zanaflex. The applicant's work status was not clearly stated, although it did not appear that the applicant was working. On August 18, 2015, the applicant reported multifocal complaints of foot, ankle, and knee pain with derivative complaints of insomnia. The applicant was using Flexeril at night for sedative effect. Flexeril, Medrox, and Xanax were endorsed. The attending provider suggested that the applicant employ Xanax for anxiolytic effect. It was not clearly stated whether the request for Xanax represented a renewal request or not.

IMR ISSUES, DECISIONS AND RATIONALES

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

Flexeril 7.5mg #30: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Cyclobenzaprine (Flexeril).

Decision rationale: No, the request for Flexeril (cyclobenzaprine) was not medically necessary, medically appropriate, or indicated here. As noted on page 41 of the MTUS Chronic Pain Medical Treatment Guidelines, the addition of cyclobenzaprine or Flexeril to other agents is not recommended. Here, the applicant was described as using a variety of other agents on office visits of August 18, 2015 and September 15, 2015, including Cymbalta, Voltaren gel, Zanaflex, Xanax, Medrox, etc. The addition of cyclobenzaprine or Flexeril to the mix was not recommended. It is further noted that the 30-tablet supply of cyclobenzaprine (Flexeril) at issue represented treatment in excess of the "short course of therapy" for which cyclobenzaprine is recommended, per page 41 of the MTUS Chronic Pain Medical Treatment Guidelines. Therefore, the request was not medically necessary.

Xanax 0.5mg #30: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009. Decision based on Non-MTUS Citation Official Disability Guidelines, Mental Illness & Health Chapter, Benzodiazepines.

MAXIMUS guideline: Decision based on MTUS Stress-Related Conditions 2004, Section(s): Treatment.

Decision rationale: Similarly, the request for Xanax, a benzodiazepine anxiolytic, was likewise 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, there was no mention of the applicant's having any overwhelming mental health issues present on the August 18, 2015 office visit at issue. Rather, it appeared that the attending provider intended for the applicant to employ Xanax for nightly use purposes, for sedative and/or anxiolytic effect. Such usage, however, ran counter to the short-term role for which anxiolytics are espoused, per the MTUS Guideline in ACOEM Chapter 15, page 402. Therefore, the request was not medically necessary.

Medrox ointment (Medrocin) 120gm: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009. Decision based on Non-MTUS Citation Official Disability Guidelines, Pain Chapter, Topical Analgesics.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Capsaicin, topical.

Decision rationale: Finally, the request for topical Medrox ointment was not medically necessary, medically appropriate, or indicated here. Medrox, per the attending provider's progress note of August 18, 2015, was/is an amalgam of methyl salicylate, menthol, and capsaicin. However, page 28 of the MTUS Chronic Pain Medical Treatment Guidelines notes that topical capsaicin, i.e., the tertiary ingredient in the compound, is not recommended except as a last-line agent, for applicants who have not responded to or are intolerant of other treatments. Here, however, the applicant's concomitant usage of multiple first-line oral pharmaceuticals including Zanaflex, Cymbalta, etc., effectively obviated the need for the capsaicin-containing Medrox compound at issue. Therefore, the request was not medically necessary.