

<b>Case Number:</b>	CM15-0188270		
<b>Date Assigned:</b>	09/30/2015	<b>Date of Injury:</b>	07/22/1999
<b>Decision Date:</b>	11/13/2015	<b>UR Denial Date:</b>	09/01/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/24/2015

### 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 foot pain reportedly associated with an industrial injury of July 22, 1999. In a utilization review report dated September 1, 2015, the claims administrator failed to approve a request for Lidoderm patches. The claims administrator referenced an RFA form received on August 25, 2015 in its determination. The applicant's attorney subsequently appealed. On August 14, 2015, the applicant reported ongoing complaints of foot pain reportedly attributed to a neuroma. Orthotics and Lidoderm patches were endorsed. The applicant was described as having tenderness about the plantar nerve first interspace, apparently attributed to a neuroma. It was not clearly stated whether the request for Lidoderm patches represented a renewal request or a first-time request. No seeming discussion of medication efficacy transpired. On March 16, 2010, the attending provider stated that the applicant was interested in a nerve ablation procedure to ameliorate issues with a stump neuroma. There was no mention of the applicant's using Lidoderm patches at that point. No seeming discussion of medication efficacy transpired. On October 28, 2010, the attending provider previously endorsed orthotics and Lidoderm patches.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Lidoderm patch #30:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** Decision based on MTUS General Approaches 2004, Section(s): Initial Approaches to Treatment, and Chronic Pain Medical Treatment 2009, Section(s): Topical Analgesics.

**Decision rationale:** No, the request for Lidoderm patches was not medically necessary, medically appropriate, or indicated here. While page 112 of the MTUS Chronic Pain Medical Treatment Guidelines does acknowledge that topical lidocaine is indicated in the treatment of localized peripheral pain or neuropathic pain in applicants in whom there has been a trial of first-line therapy of antidepressants and/or anticonvulsants, this recommendation is, however, qualified by commentary made on page 7 of the MTUS Chronic Pain Medical Treatment Guidelines and on page 47 of the ACOEM Practice Guidelines to the effect that an attending provider should incorporate some discussion of "efficacy of medication" into his choice of recommendations. Here, however, the attending provider's August 14, 2015 office visit made no mention on whether or not ongoing usage of Lidoderm patches had or had not proven beneficial. The attending provider first requested the Lidoderm patches via a historical progress note dated October 28, 2010, as noted above. It was not clearly stated whether the applicant was or was not working and/or whether or not ongoing usage of Lidoderm patches was or was not attenuating the applicant's pain complaints. Therefore, the request was not medically necessary.