

Case Number:	CM15-0193755		
Date Assigned:	10/07/2015	Date of Injury:	05/23/2014
Decision Date:	11/23/2015	UR Denial Date:	10/01/2015
Priority:	Standard	Application Received:	10/02/2015

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 52-year-old who has filed a claim for chronic low back pain (LBP) reportedly associated with an industrial injury of May 23, 2014. In a Utilization Review report dated October 1, 2015, the claims administrator failed to approve requests for laboratory testing to include a comprehensive metabolic panel-CBC-UA and Norflex. The claims administrator referenced a September 22, 2015 office visit in its determination. The applicant's attorney subsequently appealed. On September 24, 2015, the applicant reported ongoing complaints of low back pain radiating to legs. The applicant had received earlier epidural steroid injections, it was acknowledged. The applicant's medications included Nalfon, Protonix, Flexeril, tramadol, naproxen, Xeljanz, and vitamins. The applicant was reportedly working with restrictions in place; it was stated in one section of the note. An epidural steroid injection was sought. On a Utilization Review referral form dated June 18, 2015, the claims administrator contended that the applicant was not working as the claimant's employer was reportedly unable to accommodate limitations imposed by the attending provider. The remainder of the file was surveyed. The claims administrator's medical evidence log suggested that the most recent note from the attending provider who issued the request at issue on September 22, 2015 was in fact dated August 21, 2015; thus, the September 22, 2015 office visit which the claims administrator based its decision upon was not seemingly incorporated into the IMR packet.

IMR ISSUES, DECISIONS AND RATIONALES

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

Comprehensive metabolic panel CBC UA: Upheld

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

MAXIMUS guideline: Decision based on MTUS Low Back Complaints 2004, Section(s): Summary, and Chronic Pain Medical Treatment 2009, Section(s): NSAIDs, GI symptoms & cardiovascular risk.

Decision rationale: No, the request for laboratory testing to include a comprehensive metabolic panel, complete blood count (CBC), and urinalysis (UA) was not medically necessary, medically appropriate, or indicated here. While page 70 of the MTUS Chronic Pain Medical Treatment Guidelines does acknowledge that routine suggested laboratory monitoring for applicants on NSAIDs includes periodic assessment of a CBC and chemistry profile to include renal and hepatic function testing and while the MTUS Guideline in ACOEM Chapter 12, Algorithm 12-1 acknowledges that a urinalysis is indicated in applicants in whom there are red flags present for cancer or infection present, here, however, the September 22, 2015 office visit which the claims administrator based its decision upon was not seemingly incorporated into the IMR packet. It was not clearly stated or clearly established why the laboratory testing in question was sought. While the claimant was seemingly using NSAIDs to include Nalfon and naproxen, page 70 of the MTUS Chronic Pain Medical Treatment Guidelines notes that the interval of repeating laboratory tests in applicants on NSAIDs has not been established, making it difficult to support the request without the crucial September 22, 2015 office visit at issue. There was likewise no mention of the applicant's having issues with dysuria, polyuria, hematuria, or other signs or symptoms of a urinary tract infection which would have compelled the UA component of the request. Therefore, the request was not medically necessary.

Norflex ER 100 mg: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Muscle relaxants (for pain).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Introduction, Muscle relaxants (for pain).

Decision rationale: Similarly, the request for Norflex, 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 Norflex are recommended with caution as second-line options to combat acute exacerbations of chronic low back pain, here, however, a treatment duration, quantity, and frequency for Norflex were not seemingly furnished. Page 7 of the MTUS Chronic Pain Medical Treatment Guidelines further stipulates that an attending provider should incorporate some discussion of applicant-specific variables such as other medications into his choice of recommendations. Here, the September 22, 2015 office visit at issue was not seemingly incorporated into the IMR packet.

Progress notes from another provider dated September 24, 2015 and August 27, 2015, however, suggested that the applicant was using another muscle relaxant, Flexeril. It was not clearly stated why Norflex was being added to the mix, particularly with the applicant's already another muscle relaxant, Flexeril. Therefore, the request was not medically necessary.