

<b>Case Number:</b>	CM15-0195174		
<b>Date Assigned:</b>	10/09/2015	<b>Date of Injury:</b>	05/29/2001
<b>Decision Date:</b>	11/25/2015	<b>UR Denial Date:</b>	09/18/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/05/2015

### 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 66-year-old who has filed a claim for chronic knee pain reportedly associated with an industrial injury of May 25, 2001. In a Utilization Review report dated September 18, 2015, the claims administrator failed to approve requests for topical Lidoderm patches. An RFA form received on September 17, 2015 and an associated progress note dated September 16, 2015 were referenced in the determination. The applicant's attorney subsequently appealed. The claims administrator's medical evidence log, however, suggested that most recent note on file was in fact dated March 24, 2015; thus, the September 16, 2015 progress note, which the claims administrator based its decision upon was not seemingly incorporated in the IMR packet. On March 24, 2015, the applicant was described as having residual complaints of knee pain status post left and right total knee arthroplasty procedures.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Lidoderm DIS 5% day supply: 30 QTY 60 refills 03:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Topical Analgesics.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Introduction, Topical Analgesics.

**Decision rationale:** No, the request for topical 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 anticonvulsants, here, however, there was no mention of the applicant's having issues with neuropathic pain present on the most recent note on file dated March 24, 2015. Page 3 of the MTUS Chronic Pain Medical Treatment Guidelines notes that neuropathic pain is characterized with symptoms such as numbing, lancinating, electric shock-like, tingling, and/or burning sensations. Here, however, the applicant was described on March 24, 2015 as having residual complaints of mechanical knee pain status post earlier left and right knee arthroplasties. The March 24, 2015 office visit provided, furthermore, made no mention of the applicant is having previously tried and/or failed antidepressant adjuvant medications or anticonvulsant adjuvant medications. While it is acknowledged that the September 16, 2015 office visit which the claims administrator based its decision upon was not seemingly incorporated into the IMR packet, the historical information on file failed to support or substantiates the request. Therefore, the request was not medically necessary.