

<b>Case Number:</b>	CM15-0205244		
<b>Date Assigned:</b>	10/22/2015	<b>Date of Injury:</b>	04/04/2014
<b>Decision Date:</b>	12/10/2015	<b>UR Denial Date:</b>	10/07/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/19/2015

### 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 57-year-old who has filed a claim for chronic low back pain (LBP) reportedly associated with an industrial injury of April 4, 2014. In a Utilization Review report dated October 7, 2015, the claims administrator failed to approve a request for naproxen. The claims administrator referenced a September 17, 2015 office visit in its determination. On September 17, 2015, the applicant reported ongoing complaints of neck pain radiating to upper extremities, 5-7/10. The applicant was using naproxen and Flexeril for pain relief, which the treating provider suggested were beneficial. The applicant was not working, however, the treating provider acknowledged. The applicant was asked to consult a spine surgeon. Naproxen, Flexeril, Elavil, and a TENS unit were prescribed. The applicant was given a rather proscriptive 25-pound lifting limitation, which the treating provider acknowledged was resulting in the applicant's removal from the workplace.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Naproxen 550mg #60:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Anti-inflammatory medications, NSAIDs, GI symptoms & cardiovascular risk.

**MAXIMUS guideline:** Decision based on MTUS General Approaches 2004, Section(s): Initial Approaches to Treatment, and Chronic Pain Medical Treatment 2009, Section(s): Introduction, Anti-inflammatory medications.

**Decision rationale:** No, the request for naproxen, an anti-inflammatory medication, was not medically necessary, medically appropriate, or indicated here. Page 22 of the MTUS Chronic Pain Medical Treatment Guidelines does acknowledge that anti-inflammatory medications such as naproxen do represent the traditional first-line treatment for various chronic pain conditions. 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 applicant remained off of work, the treating provider reported on September 17, 2015. Ongoing usage of naproxen failed to curtail the applicant's dependence on muscle relaxants such as Flexeril and/or other forms of medical treatment to include the TENS unit. The treating provider acknowledged on September 17, 2015 that the applicant was having difficulty performing activities of daily living as basic as driving; it was reported on that date. All of the foregoing, taken together, suggested a lack of functional improvement as defined in MTUS 9792.20e, despite ongoing usage of the same. Therefore, the request was not medically necessary.