

<b>Case Number:</b>	CM15-0021791		
<b>Date Assigned:</b>	02/11/2015	<b>Date of Injury:</b>	08/05/2011
<b>Decision Date:</b>	03/31/2015	<b>UR Denial Date:</b>	01/26/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	02/05/2015

### 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: New Jersey, Michigan, California  
 Certification(s)/Specialty: Neurology, Neuromuscular 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 injured worker is a 64 year old female who sustained an industrial injury on 08/05/11. She reports low back pain, rated at 8/10. Treatments to date include medications, physical therapy, and a home back massager. Diagnoses include chronic low back pain and spinal/lumbar degenerative disc disease. In a progress note dated 01/09/15 the treating provider recommends EMLA cream and a weight loss program in addition to oral pain medications. On 01/26/15 Utilization Review non-certified EMLA cream, citing MTUS guidelines. The weight loss program was also non-certified, citing Non-MTUS guidelines.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Emla cream:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesic Page(s): 111.

**Decision rationale:** According to MTUS, in Chronic Pain Medical Treatment guidelines section Topical Analgesics (page 111), topical analgesics are largely experimental in use with few randomized controlled trials to determine efficacy or safety. Many agents are combined to other pain medications for pain control. That is limited research to support the use of many of these agents. Furthermore, according to MTUS guidelines, any compounded product that contains at least one drug or drug class that is not recommended is not recommended. Furthermore, there is no documentation of failure or intolerance of first line oral medications for the treatment of pain. Therefore, the request for this topical analgesic Emla cream is not medically necessary.

**Weight loss program:** Upheld

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

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation (Furlow and Anderson, 2009) Furlow EA and Anderson JW (2009) A systematic review of targeted outcomes associated with a medically supervised commercial weight-loss program. Journal of the American Dietetic Association 109:1417-1421. (Furlow and Anderson, 2009) Furlow EA and Anderson JW (2009) A systematic review of targeted outcomes associated with a medically supervised commercial weight-loss program. Journal of the American Dietetic Association 109:1417-1421.

**Decision rationale:** There is no documentation of obesity that requires a consultation for a weight loss program. There is no documentation that non supervised modalities of weight loss failed to control the patient weight. There is no documentation how weight loss will impact the patient pain and function. Therefore, the request for Weight loss program is not medically necessary.