

Case Number:	CM15-0027853		
Date Assigned:	02/20/2015	Date of Injury:	05/22/2007
Decision Date:	04/06/2015	UR Denial Date:	01/23/2015
Priority:	Standard	Application Received:	02/13/2015

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: California, Hawaii

Certification(s)/Specialty: Physical Medicine & Rehabilitation

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 55 year old female injured worker suffered and industrial injury on 5/22/2007. The diagnoses were musculoligamentous strain of the cervical spine and right shoulder with impingement. The treatments were epidural steroid injections medications, medications, physical therapy, right shoulder arthroscopy and rotator cuff repair. The treating provider reported improvement with the epidural steroid injections. She reported the Tizanidine helped with spasm at night with the upper back. The pain was rated as 6-7/10 right neck pain with radiation into the upper back. The pain was worse with activity. There is associated numbness in all fingers of the right hand. The Utilization Review Determination on non-certified Tizanidine 2mg #30, citing MTUS.

IMR ISSUES, DECISIONS AND RATIONALES

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

Tzanidine 2mg #30: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Muscle relaxants Page(s): 63.

Decision rationale: The patient presents with pain rated as 6-7/10 right neck with radiation into the upper back. There is associated numbness in all fingers of the right hand. The current request is for Tizanidine 2mg #30. Tizanidine (Zanaflex, generic available) is a centrally acting alpha2-adrenergic agonist that is FDA approved for management of spasticity; unlabeled use for low back pain. May also provide benefit as an adjunct treatment for fibromyalgia. The UR denial was based upon the prolonged use of the medication and prior UR certifications for weaning purpose only issued in November of 2014. The treating physician states on 12/22/14 (5B) the patient "continues to take only a low-dose muscle relaxant. She has previously failed to find meaningful relief with physical therapy." The treating physician goes on to state on 1/19/15 (9B) that the Tizanidine "has helped a lot with night spasm in her R trapezius down to the scapula, and with sleep. She almost immediately feels her muscle tightness relax." MTUS guidelines recommend non-sedating muscle relaxant with caution as a second line option for short-term treatment of acute exacerbations in patients with chronic lower back pain. However, in most cases they show no benefit beyond NSAID in pain and overall improvement. MTUS guidelines further note that Zanaflex is allowed for the use for low back pain, myofascial pain and fibromyalgia. There is no clear documentation of how long the patient has medicated with Tizanidine however usage is noted retrospectively to October 2014 (102C). Given prior UR modifications for weaning purposes and the documented usage for at least the last five months this request is not medically necessary and the recommendation is for denial.