

Case Number:	CM15-0219733		
Date Assigned:	11/12/2015	Date of Injury:	08/03/2011
Decision Date:	12/23/2015	UR Denial Date:	11/06/2015
Priority:	Standard	Application Received:	11/09/2015

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: Massachusetts

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Pain Management

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 58 year old male who sustained an industrial injury on 08-03-2011. Medical records indicated the worker was treated for neck, low back, and thoracic pain. In the provider notes of 07-22-2015, the worker complains of having difficulty getting out of bed and getting stuck in a forward flexed position with any flexion or extension of the lumbar spine causing pain. Treatments include acupuncture. Medications include Percocet, naproxen, pantoprazol, tramadol, and Medrox. On exam, the worker is in mild to moderate distress. He has a left-sided shift and is unable to stand to neutral. Flexion and extension are declined citing pain. He has 5 out of 5 strength bilaterally in iliopsoas, quadriceps, tibialis, anterior, and toe flexors with normal sensation in bilateral lower extremities. The worker will continue acupuncture and his current medication regimen. He notes medications reduce his pain by more than 50% and he is currently able to perform his activities of daily living. He has an up to date opiate consent and urine toxicology. A request for authorization was submitted for Retrospective Medrox patches, #30, dispensed 07-22-15. A utilization review decision 11-06-2015 non-certified the request.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective Medrox patches, #30, dispensed 07/22/15: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Topical Analgesics. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2007) Chapter 6, p131-132 Medications for chronic pain, p60.

Decision rationale: The claimant sustained a work injury in August 2011 and continues to be treated for neck, thoracic, and low back pain. When seen he noted a significant amount of pain over the previous month. He had severe pain with lumbar flexion or extension. He was participating in acupuncture treatments. Medications are referenced as decreasing pain by 50%. Physical examination findings included appearing in moderate distress and anxious. He had a left sided shift and was unable to stand in a neutral position. He declined lumbar flexion or extension due to pain. There was a normal neurological examination. Acupuncture was continued. Naproxen, extended release tramadol, pantoprazole, and Medrox patches were prescribed. Medrox contains methyl salicylate, capsaicin, and menthol. Menthol and methyl salicylate are used as a topical analgesic in over the counter medications such as Ben-Gay or Icy Hot. They work by first cooling the skin then warming it up, providing a topical anesthetic and analgesic effect which may be due to interference with transmission of pain signals through nerves. Guidelines address the use of capsaicin which is believed to work through a similar mechanism and is recommended as an option in patients who have not responded or are intolerant to other treatments. Guidelines recommend that when prescribing medications only one medication should be given at a time. By prescribing a multiple medications, in addition to the increased risk of adverse side effects, it would be difficult or impossible to determine whether any derived benefit was due to a particular medicine. In this case, there are other topical treatments in a non patch formulation that could be considered. Medrox patches are not medically necessary.