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| Case Number: | CM15-0060427 | | |
| Date Assigned: | 04/06/2015 | Date of Injury: | 03/22/2008 |
| Decision Date: | 05/05/2015 | UR Denial Date: | 03/25/2015 |
| Priority: | Standard | Application Received: | 03/30/2015 |

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: Maryland

Certification(s)/Specialty: Internal Medicine, Rheumatology

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 47 year old male, who sustained an industrial injury on 3/22/08. He reported a back injury. The injured worker was diagnosed as having backache, knee pain and pain in joint. Treatment to date has included oral medications including Celebrex and topical medications including Salonpas patch, physical therapy, home exercise program and acupuncture. Currently, the injured worker complains of low back pain. Physical exam revealed restricted range of motion of lumbar spine with tenderness on palpation of paravertebral muscles, hypertonicity, and muscle tightness. Tenderness is also noted over the lateral joint line of right knee. The treatment plan consisted of continuing home exercise program, right knee brace and continuation of Celebrex and Salonpas.

IMR ISSUES, DECISIONS AND RATIONALES

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

Celebrex 200mg Qty: 30 with 2 refills: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs (non-steroidal anti-inflammatory drugs).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDS Page(s): 67.

Decision rationale: This 47 year old male has complained of low back pain since date of injury 3/22/08. He has been treated with acupuncture, physical therapy and medications to include Celebrex since at least 12/2014. The current request is for Celebrex. Per the MTUS guideline cited above, NSAIDS are recommended at the lowest dose and for a short (2-4 week) duration. Additionally, there has been no proven long-term effectiveness for the treatment of pain with NSAIDS. The current request is for continuation of treatment exceeding the recommended treatment period for this medication. On the basis of the MTUS guidelines, Celebrex, 200 mg, is not indicated as medically necessary.

Salonpas Patch 10.3% Qty: 30 with 2 refills: 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 analgesics Page(s): 111.

Decision rationale: This 47 year old male has complained of low back pain since date of injury 3/22/08. He has been treated with acupuncture, physical therapy and medications. The current request is for Salonpas patch 10.3%. Per the MTUS guidelines cited above, the use of topical analgesics in the treatment of chronic pain is largely experimental, and when used, is primarily recommended for the treatment of neuropathic pain when trials of first line treatments such as anticonvulsants and antidepressants have failed. There is no such documentation in the available medical records. On the basis of the MTUS guidelines cited above, Salonpas 10.3% is not indicated as medically necessary.