

Case Number:	CM15-0239554		
Date Assigned:	12/16/2015	Date of Injury:	02/13/2012
Decision Date:	01/21/2016	UR Denial Date:	11/30/2015
Priority:	Standard	Application Received:	12/08/2015

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: Arizona, California
 Certification(s)/Specialty: Family Practice

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 65-year-old female, who sustained an industrial injury on 02-13-2012. A review of the medical records indicates that the injured worker (IW) is undergoing treatment for high cholesterol, hypothyroidism, anxiety, depression, mild herniated cervical disc (C4-7), cervical pain, and thoracic pain. Medical records (10-23-2015) indicate ongoing neck pain that radiates to the upper back and the bilateral upper extremities (80% on the left & 20% on the right) with numbness and tingling, and headaches. Pain levels were 7 out of 10 on a visual analog scale (VAS). Per the treating physician's progress report (PR), the IW was permanent and stationary. The physical exam, dated 10-23-2015, revealed tenderness to palpation over the bilateral cervical paraspinals and trapezius muscles with spasms, tenderness over the thoracic spine and bilateral rhomboids, positive cervical facet loading bilaterally, restricted and painful range of motion (ROM) in the cervical spine, restricted ROM in the thoracic spine, decreased sensation over the C7 dermatome, decreased motor strength in the bilateral upper extremities, and hyper-reflexive reflexes in the bilateral upper and lower extremities. Relevant treatments have included: physical therapy (PT), chiropractic treatments, work restrictions, and medications (oral medications). The request for authorization (10-23-2015) shows that the following medication was requested: CM4 0.05% plus Cyclo 4%. The original utilization review (11-30-2015) non-certified the request for CM4 0.05% plus Cyclo 4%.

IMR ISSUES, DECISIONS AND RATIONALES

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

CM4 0.05% plus Cyclo 4%: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Topical Analgesics.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Topical Analgesics, Capsaicin, topical.

Decision rationale: According to the MTUS guidelines, topical analgesics are recommended as an option as indicated below. They are largely experimental in use with few randomized controlled trials to determine efficacy or safety. Primarily recommended for neuropathic pain when trials of antidepressants and anticonvulsants have failed. Any compounded product that contains at least one drug (or drug class) that is not recommended is not recommended. Topical muscle relaxants such as Cyclobenzaprine are not recommended due to lack of evidence. Capsaicin is recommended in doses under .025%. An increase over this amount has not been shown to be beneficial. The claimant was also on oral muscle relaxants (Norflex). There is no justification for duplicating oral and topical medications. Since the compound above contains these topical medications, the compound in question is not medically necessary.