

Case Number:	CM14-0163951		
Date Assigned:	10/08/2014	Date of Injury:	08/19/2008
Decision Date:	11/04/2014	UR Denial Date:	09/26/2014
Priority:	Standard	Application Received:	10/06/2014

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. The expert reviewer is Board Certified in Physical Medicine and Rehabilitation and is licensed to practice in Texas. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

Medical records reflect the claimant is a 68 year old female who sustained a work injury on 8-19-08. On this date, the claimant fell backwards after getting hit by her car that a mugger tried to steal. Office visit on 9-17-14 notes the claimant had no seizures for a long time. Her low back pain remains stable with medications. Examination showed mild back tenderness. The claimant is continued on medications. Diagnoses included lumbar degenerative disc disease, seizure disorder status post head concussion, occipital neuralgia and headaches.

IMR ISSUES, DECISIONS AND RATIONALES

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

90 capsules of Amrix 15mg: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints, Chronic Pain Treatment Guidelines Muscle relaxants (for pain).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines muscle relaxants Page(s): 63-67. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain chapter - muscle relaxants

Decision rationale: Chronic Pain Medical Treatment Guidelines as well as Official Disability Guidelines (ODG) does not support the long term use of muscle relaxants. There are no extenuating circumstances to support the long term use of this medication in this case. There is

an absence in documentation noting muscle spasms. Therefore, the medical necessity of this request is not established.

90 capsules of Dexilant 60mg: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Proton Pump Inhibitors (PPIs).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines NSAID GI symptoms Page(s): 68.

Decision rationale: Chronic Pain Medical Treatment Guidelines notes that Proton Pump Inhibitors (PPI) are indicated for patients with intermediate or high risk for GI events. The claimant has not failed the first line of treatment for GI side effects. Therefore, the medical necessity of this request is not established.

90 capsules of Celebrex 200mg: 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. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) pain chapter - NSAIDs

Decision rationale: Chronic Pain Medical Treatment Guidelines as well as Official Disability Guidelines (ODG) reflect that NSAIDs are recommended at the lowest dose for the shortest period in patients with moderate to severe pain. There is an absence in documentation documenting medical necessity for the long term use of an NSAID. There is no documentation of functional improvement with this medication. Therefore, the medical necessity of this request is not established.