

<b>Case Number:</b>	CM14-0175549		
<b>Date Assigned:</b>	10/28/2014	<b>Date of Injury:</b>	01/05/2012
<b>Decision Date:</b>	12/05/2014	<b>UR Denial Date:</b>	10/09/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/23/2014

### 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 Occupational Medicine and is licensed to practice in California. 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:

The applicant is a represented [REDACTED] employee who has filed a claim for chronic shoulder pain reportedly associated with an industrial injury January 5, 2012. Thus far, the applicant has been treated with following: Analgesic medications; topical agents; opioid therapy; and unspecified amounts of physical therapy over the course of the claim. In a Utilization Review Report dated October 9, 2014, the claims administrator denied a request for Norflex. The claim administrator stated it was basing its decision on Third Edition ACOEM Guidelines, but did not incorporate the same into its report. The claims administrator stated that it was basing its decision on September 30, 2014 RFA form and associated progress note of August 28, 2014. In a Medical Legal Evaluation dated March 5, 2014, the applicant was described as status post right shoulder surgery in May 2012 and left shoulder surgery in April 2013. The Medical-legal evaluator opined that the applicant had not as yet reached maximum medical improvement. The file was surveyed on several occasions; neither the September 30, 2014 RFA form or the associated August 28, 2014 progress note was incorporated into the IMR packet. In a Utilization Review Report dated October 9, 2014, the claims administrator denied a request for Norflex. The claim administrator stated it was basing its decision on Third Edition ACOEM Guidelines, but did not incorporate the same into its report. The claims administrator stated that it was basing its decision on September 30, 2014 RFA form and associated progress note of August 28, 2014. The applicant's attorney subsequently appealed. In a Medical Legal Evaluation dated March 5, 2014, the applicant was described as status post right shoulder surgery in May 2012 and left shoulder surgery in April 2013. The Medical-legal evaluator opined that the applicant had not as yet reached maximum medical improvement. The file was surveyed on several occasions; neither the September 30, 2014 RFA form nor the associated August 28, 2014 progress note was incorporated into the IMR packet.

## **IMR ISSUES, DECISIONS AND RATIONALES**

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

**Norflex ER 100 mg # 60 for the symptoms of right shoulder pain as an outpatient:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 9 Shoulder Complaints.

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

**Decision rationale:** As noted on page 63 of the MTUS Chronic Pain Medical Treatment Guidelines, muscle relaxants such as Norflex are recommended with caution as a second-line option to combat acute exacerbations of chronic low back pain. The 60-tablet supply endorsed here, thus, runs counter to MTUS principles and parameters. While it is acknowledged that the September 30, 2014 RFA form and associated August 28, 2014 progress note were not incorporated into the Independent Medical Review packet, the information which is on file, however, fails to support or substantiate the request. Therefore, the request is not medically necessary.