

Case Number:	CM13-0072459		
Date Assigned:	01/03/2014	Date of Injury:	02/23/2003
Decision Date:	04/13/2015	UR Denial Date:	12/13/2013
Priority:	Standard	Application Received:	12/31/2013

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: Texas, New York, California
 Certification(s)/Specialty: Preventive Medicine, Occupational Medicine

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 70-year-old who has filed a claim for chronic low back, neck, shoulder, and ankle pain reportedly associated with an industrial injury of February 20, 2003. In a Utilization Review Report dated December 13, 2013, the claims administrator failed to approve a request for several topical compounded medications. The claims administrator seemingly referenced an October 29, 2013 progress note in its determination. The applicant's attorney subsequently appealed. On December 4, 2013, the topical compounded medications at issue were endorsed via an RFA form. Handwritten, undated prescriptions for several topical compounds were also noted at various points on file. On March 21, 2015, the applicant presented with ongoing complaints of low back, ankle, bilateral shoulder, and bilateral elbow pain. Naprosyn, Prilosec, Flexeril, tramadol, topical compounds, and permanent work restrictions were endorsed. It was not stated whether the applicant was or was not working with said permanent limitations in place.

IMR ISSUES, DECISIONS AND RATIONALES

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

Capsaicin/Camphor/Menthol/Lidocaine/Gabapentin 0.05% 2% 1% 2% 10% (WASABE) Cream, 120 grams, Refill:1, Quantity: 60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 112-113.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Capsaicin, topical Page(s): 28.

Decision rationale: No, the request for a capsaicin-containing topical compound was not medically necessary, medically appropriate, or indicated here. As noted on page 28 of the MTUS Chronic Pain Medical Treatment Guidelines, capsaicin, the primary ingredient in the compound, is recommended only as an option in applicants who have not responded to or are intolerance of other treatments. Here, however, the applicant's ongoing usage of multiple first-line oral pharmaceuticals, including Naprosyn and tramadol, effectively obviated the need for the capsaicin-containing compound at issue. Therefore, the request was not medically necessary.

Medrox Cream, 120 grams, Refill: 1, Quantity: 240: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 112-113.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Capsaicin, topical Page(s): 28.

Decision rationale: Similarly, the Medrox cream was likewise not medically necessary, medically appropriate, or indicated here. Medrox is another capsaicin-containing amalgam/compound. However, page 28 of the MTUS Chronic Pain Medical Treatment Guidelines notes that topical capsaicin is recommended only as a last-line agent, for applicants who have not responded to or are intolerance of other treatments. Here, the applicant's ongoing usage of multiple first-line oral pharmaceuticals, including Naprosyn and tramadol, effectively obviated the need for the capsaicin-containing Medrox compound at issue. Therefore, the request was not medically necessary.