

Case Number:	CM15-0011800		
Date Assigned:	01/29/2015	Date of Injury:	08/15/2011
Decision Date:	03/26/2015	UR Denial Date:	01/08/2015
Priority:	Standard	Application Received:	01/20/2015

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: California, New York, Florida

Certification(s)/Specialty: Internal Medicine, Pulmonary Disease, Critical Care 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 injured worker is a 55-year-old female who reported an injury on 08/15/2011 due to an unspecified mechanism of injury. A reconsideration letter dated 01/14/2015 indicates that the injured worker's medications alprazolam and temazepam were denied. It was noted that she was taking benzodiazepines for long term use with generalized anxiety disorder. It was also stated that she had an objective functional improvement with the use of these medications. No recent documentation was provided regarding her condition, subjective complaints and examination findings. The treatment plan was for alprazolam 0.5 mg #120 with 2 refills and temazepam 15 mg #60 with 2 refills. The rationale for treatment was for the injured worker's generalized anxiety disorder treatment.

IMR ISSUES, DECISIONS AND RATIONALES

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

Alprazolam 0.5 Mg #120 Ref: 2: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Benzodiazepines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Benzodiazepines Page(s): 24.

Decision rationale: The California MTUS Guidelines indicate that benzodiazepines are only recommended for short term use of no more than 4 weeks. Documentation provided indicates that the injured worker has been using benzodiazepines for long term treatment of her generalized anxiety disorder. However, the guidelines do not support the long term use of this medication. Therefore, continuing would not be supported. Also, the frequency of the medication was not provided within the request. Furthermore, 2 refills would not be supported without a re-evaluation to determine treatment success. Therefore, the request is not supported. As such, the request is not medically necessary.

Temazepam 15 Mg #60 Ref: 2: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG, Pain

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Benzodiazepines Page(s): 24.

Decision rationale: The California MTUS Guidelines indicate that benzodiazepines are only recommended for short term use of no more than 4 weeks. Documentation provided indicates that the injured worker has been using benzodiazepines for long term treatment of her generalized anxiety disorder. However, the guidelines do not support the long term use of this medication. Therefore, continuing would not be supported. Also, the frequency of the medication was not provided within the request. Furthermore, 2 refills would not be supported without a re-evaluation to determine treatment success. Therefore, the request is not supported. As such, the request is not medically necessary.