

Case Number:	CM15-0127670		
Date Assigned:	07/14/2015	Date of Injury:	09/07/2010
Decision Date:	08/11/2015	UR Denial Date:	06/24/2015
Priority:	Standard	Application Received:	07/01/2015

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: 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 50-year-old who has filed a claim for major depressive disorder (MDD), generalized anxiety disorder (GAD), dementia, and migraine headaches reportedly associated with an industrial carbon monoxide exposure on December 7, 2010. In a Utilization Review report dated June 24, 2015, the claims administrator failed to approve a request for eight Botox injections. An RFA form received on June 17, 2015 was referenced in the determination. On January 7, 2015, the attending provider posited that the applicant's migraine headaches were responding favorably to Botox injections. The applicant had received Botox injection in November 2014, it was reported. Follow-up Botox injections were endorsed. The applicant's work status was not detailed. On May 4, 2015, the applicant again presented alleging issues with chronic migraines secondary to Botox, it was reported. The applicant was also alleging possible dementia. The applicant had reportedly used Namenda in the past, it was reported. The applicant's memory had worsened of late. Repeat Botox injections were again endorsed. The applicant's work status was not detailed. In a June 24, 2015 medical-legal evaluation, the medical-legal evaluator reported that the applicant's headaches were "not responsive" to previous Botox injections. The applicant had issues with depression, tearfulness, hopelessness, panic attacks, and anxiety, it was reported. The medical-legal evaluator opined that the applicant remain totally temporarily disabled.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective review of Botox Injection x 8 DOS: 06/04/2015: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Botulinum toxin (Botox; Myobloc).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Botulinum toxin (Botox; Myobloc) Page(s): 26.

Decision rationale: No, the request for eight Botox injections was not medically necessary, medically appropriate, or indicated here. The requesting provider suggested that the Botox injections were intended to treat issues with migraine headaches. However, page 26 of the MTUS Chronic Pain Medical Treatment Guidelines notes that the Botox injections are "not recommended" for migraine headaches, i.e., the diagnosis reportedly present here. The applicant, however, had received multiple requests of Botox injections, despite the unfavorable MTUS position on the same for the diagnosis in question, migraine headaches. A medical-legal evaluator stated on June 24, 2015 that the applicant's headaches were "not responsive" to previously performed Botox injections. The applicant remained off of work, on total temporary disability, it was reported on this date, despite receipt of multiple prior Botox injections over the course of the claim. All of the foregoing, taken together, suggested lack of functional improvement as defined in MTUS 9792.20e. It did not appear, in short, that applicant profited from prior Botox injections. Therefore, the request was not medically necessary.