

Case Number:	CM15-0176665		
Date Assigned:	09/17/2015	Date of Injury:	08/14/2012
Decision Date:	10/21/2015	UR Denial Date:	08/20/2015
Priority:	Standard	Application Received:	09/08/2015

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, Indiana, New York
 Certification(s)/Specialty: Internal 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 49 year old male who sustained an industrial injury on 8-14-12. The injured worker reported right ankle and foot pain. A review of the medical records indicates that the injured worker is undergoing treatments for status post lateral ligament injury right ankle, status post straining injury right foot, probably right sural nerve neuropraxia and right calcaneal navicular tarsal coalition. Provider documentation dated 7-16-15 noted the work status as "being released to work with restrictions". Treatment has included Voltaren since at least January of 2015, Prilosec since at least January of 2015, Tramadol since at least January of 2015, right ankle magnetic resonance imaging (3-20-15), computed tomography of the right lower extremity (4-29-15), Elavil since at least June of 2015, and Tylenol since at least June of 2015. Objective findings dated 7-16-15 were notable for tenderness to palpation to the lateral ligaments, lateral border of the right foot, and right plantar fascia. The original utilization review (8-20-15) denied a request for Voltaren 100 milligrams quantity of 60 and Prilosec 20 milligrams quantity of 60.

IMR ISSUES, DECISIONS AND RATIONALES

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

Voltaren 100mg #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): NSAIDs (non-steroidal anti-inflammatory drugs). Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain section, NSAIDs (non-steroidal anti-inflammatory drugs).

Decision rationale: Pursuant to the to the Chronic Pain Medical Treatment Guidelines and the Official Disability Guidelines, Voltaren 100 mg #60 is not medically necessary. Non-steroidal anti-inflammatory drugs are recommended at the lowest dose for the shortest period in patients with moderate to severe pain. There is no evidence to recommend one drug in this class over another based on efficacy. There appears to be no difference between traditional non-steroidal anti-inflammatory drugs and COX-2 non-steroidal anti-inflammatory drugs in terms of pain relief. The main concern of selection is based on adverse effects. Diclofenac is not recommended as a first-line drug due to its increased risk profile. In this case, the injured worker's working diagnoses are status post lateral ligament injury right ankle; status post straining injury right foot; probable right sural nerve neuropraxia; and right calcaneal/navicular tarsal coalition. Date of injury is August 14, 2012. Request for authorization is June 25, 2015. According to a progress note dated January 29, 2015, the treating provider prescribed Voltaren and Prilosec. According to the progress note dated June 25, 2015, subjectively the injured worker self-treats without improvement. Objectively right ankle's tender to palpation over the lateral ligaments. Voltaren was continued through the present. Diclofenac (Voltaren) is not recommended as a first-line drug due to its increased risk profile. There are no compelling facts to support the ongoing use of Diclofenac. Based on clinical information in the medical record, peer-reviewed evidence-based guidelines, no documentation of failed first-line non-steroidal anti-inflammatory drugs, no clinical indication or rationale for Voltaren and guideline non-recommendation due to the increased risk profile, Voltaren 100 mg #60 is not medically necessary.

Prilosec 20mg #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain section, Proton pump inhibitors (PPIs).

Decision rationale: Pursuant to the Chronic Pain Medical Treatment Guidelines and the Official Disability Guidelines, Prilosec 20mg #60 is not medically necessary. Omeprazole is a proton pump inhibitor. Proton pump inhibitors are indicated in certain patients taking non-steroidal anti-inflammatory drugs that are at risk for gastrointestinal events. These risks include, but are not limited to, age greater than 65; history of peptic ulcer, G.I. bleeding; concurrent use of aspirin or corticosteroids; or high-dose multiple non-steroidal anti-inflammatory drugs. Protonix, Dexilant and Aciphex should be second line PPIs. In this case, the injured worker's working diagnoses are status post lateral ligament injury right ankle; status post straining injury right foot; probable

right sural nerve neuropraxia; and right calcaneal/navicular tarsal coalition. Date of injury is August 14, 2012. Request for authorization is June 25, 2015. According to a progress note dated January 29, 2015, the treating provider prescribed Voltaren and Prilosec. According to the progress note dated June 25, 2015, subjectively the injured worker self-treats without improvement. Objectively right ankle's tender to palpation over the lateral ligaments. There are no comorbid conditions or risk factors for gastrointestinal events. There is no clinical indication or rationale for Prilosec. Additionally, the non-steroidal anti-inflammatory drug Voltaren was not medically necessary and, as a result, Prilosec is not recommended. Based on the clinical information in the medical record, peer-reviewed evidence-based guidelines, no co-morbid conditions or risk factors for gastrointestinal events, and no clinical indication or rationale for proton pump inhibitors, Prilosec 20mg #60 is not medically necessary.