

Case Number:	CM15-0070025		
Date Assigned:	04/17/2015	Date of Injury:	08/01/2001
Decision Date:	05/19/2015	UR Denial Date:	03/26/2015
Priority:	Standard	Application Received:	04/13/2015

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 51-year-old who filed a claim for chronic shoulder, elbow and upper extremity pain reportedly associated with an industrial injury of October 1, 2001. In a Utilization Review report dated March 26, 2015, the claims administrator failed to approve a request for ibuprofen. The claims administrator referenced March 18, 2015 RFA form in its determination. The applicant's attorney subsequently appealed. On April 8, 2015, the applicant reported persistent complaints of shoulder pain. The applicant was asked to continue Norco, Motrin, and Prilosec. 4/10 pain with medications versus 9/10 without medications was noted. Motrin and Norco were apparently continued. The applicant had undergone earlier ulnar decompression surgery. It was suggested (but not clearly stated) that the applicant was working as of this point in time. On December 3, 2014, the applicant reported persistent complaints of elbow, wrist, and shoulder pain. The attending provider stated that the applicant was using Norco for moderate-to-severe pain, Motrin for less severe pain, and Prilosec for dyspepsia. 3/10 pain with medications versus 9/10 without medications was noted. The attending provider stated that the applicant was working full duty on this particular date. Multiple medications were renewed. On March 9, 2015, the applicant maintained that the applicant had maintained full time, regular duty status post with ongoing medication consumption. The attending provider maintained that the applicant's usage of Motrin and Norco had effectively ameliorated pain complaints. The applicant was returned to regular duty work at the bottom of the note.

IMR ISSUES, DECISIONS AND RATIONALES

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

IBUPROFEN 800 MG # 90: Overturned

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Anti-inflammatory medications Page(s): 22.

Decision rationale: Yes, the request for ibuprofen (Motrin), an anti-inflammatory medication, was medically necessary, medically appropriate, and indicated here. As noted on page 22 of the MTUS Chronic Pain Medical Treatment Guidelines, anti-inflammatory medications such as Motrin (ibuprofen) do represent the traditional first line of treatment for various chronic pain conditions, including the chronic elbow, shoulder, and wrist pain reportedly present here. The applicant has demonstrated a favorable response to the same as evinced by subjective reports of appropriate analgesia with medications and as evinced by the applicant's return to and maintenance of full time, regular duty work status. Continuing the same, on balance, was indicated. Therefore, the request was medically necessary.