

Case Number:	CM15-0071525		
Date Assigned:	04/22/2015	Date of Injury:	10/01/2009
Decision Date:	06/11/2015	UR Denial Date:	03/31/2015
Priority:	Standard	Application Received:	04/14/2015

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 41-year-old who has filed a claim for chronic knee pain reportedly associated with an industrial injury of October 1, 2009. In a Utilization Review report dated March 31, 2015, the claims administrator failed to approve a request for Menthoderm gel, a salicylate topical. A March 24, 2015 progress note was referenced in the determination. The claims administrator did not state whether the request represented a first-time request or a renewal request. The applicant's attorney subsequently appealed. On August 30, 2014, the applicant reported ongoing complaints of knee and low back pain, 7-8/10, with derivative complaints of anxiety, depression, and psychological stress. The applicant was asked to continue unspecified medications. On September 14, 2012, the applicant was asked to try and lose weight, attend a weight loss program, obtain knee surgery, continue a cold unit, continue acupuncture, continue a knee brace, and continue OxyContin. Once again, the applicant's work status was not detailed. The claims administrator's medical evidence log acknowledged that the August 30, 2014 progress note in fact represented the most recent progress note on file; thus, the March 24, 2015 RFA form and associated progress note on which the article in question was proposed were not incorporated into the IMR packet.

IMR ISSUES, DECISIONS AND RATIONALES

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

Menthoderm 120gm: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical analgesics Page(s): 111.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Functional Restoration Approach to Chronic Pain Management Page(s): 7.

Decision rationale: No, the request for topical Mentoderm gel, a salicylate topical, was not medically necessary, medically appropriate, or indicated here. While page 105 of the MTUS Chronic Pain Medical Treatment Guidelines does acknowledge that salicylate topicals such as Mentoderm are recommended in the chronic pain context present here, this recommendation is, however, qualified by commentary made on page 7 of the MTUS Chronic Pain Medical Treatment Guidelines to the effect that an attending provider should incorporate some discussion of efficacy of medication into his choice of recommendations. Here, however, there was, by definition, no discussion of medication efficacy. The March 24, 2015 progress note on which the article in question was proposed was not incorporated into the IMR packet. The historical progress note on file made no mention of the applicant's need for Mentoderm. It was not stated whether the request was a first-time request or a renewal request and/or whether the applicant had or had not profited from the same. Therefore, the request was not medically necessary.