

Case Number:	CM15-0079897		
Date Assigned:	04/30/2015	Date of Injury:	09/24/2010
Decision Date:	06/02/2015	UR Denial Date:	03/20/2015
Priority:	Standard	Application Received:	04/27/2015

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: North Carolina, Georgia
 Certification(s)/Specialty: Family Practice

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 54 year old male, who sustained an industrial injury on 09/24/2010. He reported a pinch in his right knee and ankle and loss of strength. Diagnoses included pain in joint of ankle and foot, sprains and strains of knee and leg not otherwise specified and enthesopathy of ankle and tarsus. According to a progress report dated 03/02/2015, the injured worker was experiencing pain in his right ankle that had been present for 4 years. Numbness, pins and needles and weakness was associated with the pain. Treatment to date has included MRI, electrodiagnostic studies, surgery, cortisone injection, physical therapy and medications. He was taking Celebrex occasionally and noted 30 to 40 percent relief of pain. The provider encouraged the injured worker to use the Celebrex daily and started him on a topical Pennsaid lotion 2%. Currently under review is the request for Celebrex and Pennsaid 2%.

IMR ISSUES, DECISIONS AND RATIONALES

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

Celebrex 200 Mg Capsule sig one Qd Qty #30: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Section 2 Page(s): 67-68.

Decision rationale: CA MTUS guidelines are clear that NSAIDs should be used at the lowest possible dose for the shortest period possible. There is specific caution that NSAIDs have been shown to slow healing in all soft tissue including muscle, ligaments, tendons and cartilage. Celebrex is a Cox-2 specific NSAID and MTUS guidelines state that NSAID use guidelines apply to use of Celebrex. The request for Celebrex 200 mg #30 does not meet the criteria of providing lowest dose of NSAID for the shortest time possible as he has been on the medication for several years. There is no documentation of any trials of lower doses. Celebrex 200 mg #30 is not medically necessary.

Pennsaid 2% 20 mg/Gram/actuactions (2%) Sig: Two Pumps to Right Knee Bid Qty 2.00:
Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Topical Analgesics.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Section 2 Page(s): 111-113.

Decision rationale: CA MTUS recommends limited use of topical analgesics. There is limited evidence for short-term use of topical NSAID analgesics for osteoarthritis with most benefit seen in use up to 12 weeks but no demonstrated benefit beyond this time period. Pennsaid is recommended for treatment of osteoarthritis in joints for which lend themselves to topical treatment such as ankle, knee, elbow, wrist, hand and foot. In this case, the record indicates that currently used medication (Celebrex) does not provide adequate relief. Pennsaid is being added due to this treatment failure and is medically necessary.