

<b>Case Number:</b>	CM13-0045467		
<b>Date Assigned:</b>	12/27/2013	<b>Date of Injury:</b>	05/16/2009
<b>Decision Date:</b>	03/31/2014	<b>UR Denial Date:</b>	10/17/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/12/2013

### HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Anesthesiology, has a subspecialty in Pain Management and is licensed to practice in Georgia. 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 physician 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

### CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

Claimant presents with back pain following a work-related injury on May 16, 2009. On August 19, 2013 the claimant presented to the emergency department reporting back pain in the area of the upper lumbar spine, low lumbar spine, right side of the upper lumbar spine and right side of the lower lumbar spine. The pain was described as radiating to the upper back. The claimant had 2 epidurals and was hospitalized for bowel dysfunction which later resolved. The physical exam was significant for bilateral lumbar tenderness. X-rays reveal satisfactory alignment of the lumbar vertebra and stable appearance when compared to CT scan from July 14, 2013. Laboratory studies were ordered. The claimant was given IV hydromorphone 1 mg, Zofran 4 mg, an additional dose of IV hydromorphone 1 mg when the claimant continued to complain of pain. The medical records noted that the claimant had persistent low back pain with mildly abnormal urinary analysis with elevated white blood count and peripherally. The claimant was given Cipro and Percocet prescription. Urine drug screen on August 5, 2013 had the presence of marijuana and oxazepam. The claimant had additional visits to the emergency room on July 24, 2013 for reports of diarrhea following an epidural steroid injection and she was treated with IV hydromorphone for total of 3 mg Ativan by mouth and Norco 10 mg. The claimant was diagnosed with lumbosacral disc disease without clinical evidence of radiculopathy, neuralgia, neuritis degeneration of lumbar disc, lumbar ago and radiculitis unspecified.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Retrospective emergency room visit on 7/24/2013: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303,Chronic Pain Treatment Guidelines Page(s): 76-80. Decision based on Non-MTUS Citation Independent Medical Examinations and Consultations, Chapter 7, pg.127, <http://www.cigna.com/assets/docs/hea;th-care-professionals/coverage-positions/>; <http://www.webmd.com/drugs>

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 84. Decision based on Non-MTUS Citation Official Disability Guidelines (Official Disability Guidelines (ODG).

**Decision rationale:** Retrospective emergency room visit on 7/24/2013 is not medically necessary. Per Ca MTUS the patient on opioids should adhere to an opioid contract. "This plan should be signed and dated and placed in the patient's chart, and include the following: (1) Goals of therapy, (2) Only one provider gives prescriptions, (3) Only one pharmacy dispenses prescriptions, (4) There will be a limit of number of medications, and dose of specific medications, (5) Medications are not to be altered without the prescribing doctor's permission, (6) Heavy machinery and automobile driving is not to occur until drug-induced sedation/drowsiness has cleared, (7) Refills are limited, and will only occur at appointments, (8) Treatment compliance must occur for all other modalities enlisted, (9) Urine drug screens may be required, (10) The patient must acknowledge that they are aware of potential adverse effects of the use of opioids including addiction, (11) Information about opioid management can be shared with family members and other providers as necessary, (12) If opioid use is not effective, the option of discontinuing this therapy may occur, (13) The consequence of non-adherence to the treatment agreement is outlined." The claimant had multiple visits to the emergency room in order to obtain opioid treatment; therefore the requested service is not medically necessary

**Retrospective complete blood count preformed on 7/24/2013: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303,Chronic Pain Treatment Guidelines Page(s): 76-80. Decision based on Non-MTUS Citation for Independent Medical Examinations and Consultations, Chapter 7, pg.127, <http://www.cigna.com/assets/docs/hea;th-care-professionals/coverage-positions/>; <http://www.webmd.com/drugs>

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids. Page(s): 84.

**Decision rationale:** Retrospective complete blood count preformed on 7/24/2013 is not medically necessary. Per Ca MTUS the patient on opioids should adhere to an opioid contract. "This plan should be signed and dated and placed in the patient's chart, and include the following: (1) Goals of therapy, (2) Only one provider gives prescriptions, (3) Only one pharmacy dispenses prescriptions, (4) There will be a limit of number of medications, and dose of specific medications, (5) Medications are not to be altered without the prescribing doctor's permission, (6) Heavy machinery and automobile driving is not to occur until drug-induced sedation/drowsiness has cleared, (7) Refills are limited, and will only occur at appointments, (8)

Treatment compliance must occur for all other modalities enlisted, (9) Urine drug screens may be required, (10) The patient must acknowledge that they are aware of potential adverse effects of the use of opioids including addiction, (11) Information about opioid management can be shared with family members and other providers as necessary, (12) If opioid use is not effective, the option of discontinuing this therapy may occur, (13) The consequence of non-adherence to the treatment agreement is outlined." The claimant had multiple visits to the emergency room in order to obtain opioid treatment; therefore the requested service is not medically necessary.

**Retrospective BMP performed on 7/24/2013: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303,Chronic Pain Treatment Guidelines Page(s): 76-80. Decision based on Non-MTUS Citation Independent Medical Examinations and Consultations, Chapter 7, pg.127; <http://www.cigna.com/assets/docs/hea;th-care-professionals/coverage-positions/>; <http://www.webmd.com/drugs>

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 84.

**Decision rationale:** Retrospective BMP performed on 7/24/2013 is not medically necessary. Per Ca MTUS the patient on opioids should adhere to an opioid contract. "This plan should be signed and dated and placed in the patient's chart, and include the following: (1) Goals of therapy, (2) Only one provider gives prescriptions, (3) Only one pharmacy dispenses prescriptions, (4) There will be a limit of number of medications, and dose of specific medications, (5) Medications are not to be altered without the prescribing doctor's permission, (6) Heavy machinery and automobile driving is not to occur until drug-induced sedation/drowsiness has cleared, (7) Refills are limited, and will only occur at appointments, (8) Treatment compliance must occur for all other modalities enlisted, (9) Urine drug screens may be required, (10) The patient must acknowledge that they are aware of potential adverse effects of the use of opioids including addiction, (11) Information about opioid management can be shared with family members and other providers as necessary, (12) If opioid use is not effective, the option of discontinuing this therapy may occur, (13) The consequence of non-adherence to the treatment agreement is outlined." The claimant had multiple visits to the emergency room in order to obtain opioid treatment; therefore the requested service is not medically necessary.

**Retrospective PT/INR performed on 7/24/2013: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303,Chronic Pain Treatment Guidelines Page(s): 76-80. Decision based on Non-MTUS Citation Independent Medical Examinations and Consultations, Chapter 7, pg.127, <http://www.cigna.com/assets/docs/hea;th-care-professionals/coverage-positions/>; <http://www.webmd.com/drugs>;

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 84.

**Decision rationale:** Retrospective PT/INR performed on 7/24/2013 is not medically necessary. Per Ca MTUS the patient on opioids should adhere to an opioid contract. "This plan should be signed and dated and placed in the patient's chart, and include the following: (1) Goals of therapy, (2) Only one provider gives prescriptions, (3) Only one pharmacy dispenses prescriptions, (4) There will be a limit of number of medications, and dose of specific medications, (5) Medications are not to be altered without the prescribing doctor's permission, (6) Heavy machinery and automobile driving is not to occur until drug-induced sedation/drowsiness has cleared, (7) Refills are limited, and will only occur at appointments, (8) Treatment compliance must occur for all other modalities enlisted, (9) Urine drug screens may be required, (10) The patient must acknowledge that they are aware of potential adverse effects of the use of opioids including addiction, (11) Information about opioid management can be shared with family members and other providers as necessary, (12) If opioid use is not effective, the option of discontinuing this therapy may occur, (13) The consequence of non-adherence to the treatment agreement is outlined." The claimant had multiple visits to the emergency room in order to obtain opioid treatment; therefore the requested service is not medically necessary

**Retrospective IV Ondansetron, 4mg, given on 7/24/2013: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303, Chronic Pain Treatment Guidelines Page(s): 76-80. Decision based on Non-MTUS Citation Independent Medical Examinations and Consultations, Chapter 7, pg.127; <http://www.cigna.com/assets/docs/hea;th-care-professionals/coverage-positions/>; <http://www.webmd.com/drugs>;

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 84.

**Decision rationale:** Retrospective IV Ondansetron, 4mg, given on 7/24/2013 is not medically necessary. Per Ca MTUS the patient on opioids should adhere to an opioid contract. "This plan should be signed and dated and placed in the patient's chart, and include the following: (1) Goals of therapy, (2) Only one provider gives prescriptions, (3) Only one pharmacy dispenses prescriptions, (4) There will be a limit of number of medications, and dose of specific medications, (5) Medications are not to be altered without the prescribing doctor's permission, (6) Heavy machinery and automobile driving is not to occur until drug-induced sedation/drowsiness has cleared, (7) Refills are limited, and will only occur at appointments, (8) Treatment compliance must occur for all other modalities enlisted, (9) Urine drug screens may be required, (10) The patient must acknowledge that they are aware of potential adverse effects of the use of opioids including addiction, (11) Information about opioid management can be shared with family members and other providers as necessary, (12) If opioid use is not effective, the option of discontinuing this therapy may occur, (13) The consequence of non-adherence to the treatment agreement is outlined." The claimant had multiple visits to the emergency room in order to obtain opioid treatment; therefore the requested service is not medically necessary.

**Retrospective IV Dilaudid, 1mg, given on 7/24/2013: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303,Chronic Pain Treatment Guidelines Page(s): 76-80. Decision based on Non-MTUS Citation for Independent Medical Examinations and Consultations, Chapter 7, pg.127; <http://www.cigna.com/assets/docs/hea;th-care-professionals/coverage-positions/>; <http://www.webmd.com/drugs>

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 84.

**Decision rationale:** Retrospective IV Dilaudid, 1mg, given on 7/24/2013 is not medically necessary. Per Ca MTUS the patient on opioids should adhere to an opioid contract. "This plan should be signed and dated and placed in the patient's chart, and include the following: (1) Goals of therapy, (2) Only one provider gives prescriptions, (3) Only one pharmacy dispenses prescriptions, (4) There will be a limit of number of medications, and dose of specific medications, (5) Medications are not to be altered without the prescribing doctor's permission, (6) Heavy machinery and automobile driving is not to occur until drug-induced sedation/drowsiness has cleared, (7) Refills are limited, and will only occur at appointments, (8) Treatment compliance must occur for all other modalities enlisted, (9) Urine drug screens may be required, (10) The patient must acknowledge that they are aware of potential adverse effects of the use of opioids including addiction, (11) Information about opioid management can be shared with family members and other providers as necessary, (12) If opioid use is not effective, the option of discontinuing this therapy may occur, (13) The consequence of non-adherence to the treatment agreement is outlined." The claimant had multiple visits to the emergency room in order to obtain opioid treatment; therefore the requested service is not medically necessary.

**Retrospective IV Dilaudid, 2mg, given on 7/24/2013:**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303,Chronic Pain Treatment Guidelines Page(s): 76-80. Decision based on Non-MTUS Citation Independent Medical Examinations and Consultations, Chapter 7, pg.127; <http://www.cigna.com/assets/docs/hea;th-care-professionals/coverage-positions/>; <http://www.webmd.com/drugs>;

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 84. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG).

**Decision rationale:** Retrospective IV Dilaudid, 2mg, given on 7/24/2013 is not medically necessary. Per Ca MTUS the patient on opioids should adhere to an opioid contract. "This plan should be signed and dated and placed in the patient's chart, and include the following: (1) Goals of therapy, (2) Only one provider gives prescriptions, (3) Only one pharmacy dispenses prescriptions, (4) There will be a limit of number of medications, and dose of specific medications, (5) Medications are not to be altered without the prescribing doctor's permission, (6) Heavy machinery and automobile driving is not to occur until drug-induced sedation/drowsiness has cleared, (7) Refills are limited, and will only occur at appointments, (8) Treatment compliance must occur for all other modalities enlisted, (9) Urine drug screens may be required, (10) The patient must acknowledge that they are aware of potential adverse effects

of the use of opioids including addiction, (11) Information about opioid management can be shared with family members and other providers as necessary, (12) If opioid use is not effective, the option of discontinuing this therapy may occur, (13) The consequence of non-adherence to the treatment agreement is outlined." The claimant had multiple visits to the emergency room in order to obtain opioid treatment; therefore the requested service is not medically necessary.

**Retrospective IV Zofran, 4mg. given on 7/24/2013: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303. Decision based on Non-MTUS Citation Independent Medical Examinations and Consultations, Chapter 7, pg.127; <http://www.cigna.com/assets/docs/hea;th-care-professionals/coverage-positions/>; <http://www.webmd.com/drugs>;

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 84.

**Decision rationale:** Retrospective IV Zofran, 4mg, given on 7/24/2013 is not medically necessary. Per Ca MTUS the patient on opioids should adhere to an opioid contract. "This plan should be signed and dated and placed in the patient's chart, and include the following: (1) Goals of therapy, (2) Only one provider gives prescriptions, (3) Only one pharmacy dispenses prescriptions, (4) There will be a limit of number of medications, and dose of specific medications, (5) Medications are not to be altered without the prescribing doctor's permission, (6) Heavy machinery and automobile driving is not to occur until drug-induced sedation/drowsiness has cleared, (7) Refills are limited, and will only occur at appointments, (8) Treatment compliance must occur for all other modalities enlisted, (9) Urine drug screens may be required, (10) The patient must acknowledge that they are aware of potential adverse effects of the use of opioids including addiction, (11) Information about opioid management can be shared with family members and other providers as necessary, (12) If opioid use is not effective, the option of discontinuing this therapy may occur, (13) The consequence of non-adherence to the treatment agreement is outlined." The claimant had multiple visits to the emergency room in order to obtain opioid.

**Retrospective CT scan of the lumbar spine with IV contrast preformed on 7/24/2013 in the ED is not: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303. Decision based on Non-MTUS Citation Independent Medical Examinations and Consultations, Chapter 7, pg.127; <http://www.cigna.com/assets/docs/hea;th-care-professionals/coverage-positions/>; <http://www.webmd.com/drugs>.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 84.

**Decision rationale:** Decision for the retrospective CT scan of the lumbar spine with IV contrast preformed on 7/24/2013 in the ED is not medically necessary. Per Ca MTUS the patient on opioids should adhere to an opioid contract. "This plan should be signed and dated and placed in

the patient's chart, and include the following: (1) Goals of therapy, (2) Only one provider gives prescriptions, (3) Only one pharmacy dispenses prescriptions, (4) There will be a limit of number of medications, and dose of specific medications, (5) Medications are not to be altered without the prescribing doctor's permission, (6) Heavy machinery and automobile driving is not to occur until drug-induced sedation/drowsiness has cleared, (7) Refills are limited, and will only occur at appointments, (8) Treatment compliance must occur for all other modalities enlisted, (9) Urine drug screens may be required, (10) The patient must acknowledge that they are aware of potential adverse effects of the use of opioids including addiction, (11) Information about opioid management can be shared with family members and other providers as necessary, (12) If opioid use is not effective, the option of discontinuing this therapy may occur, (13) The consequence of non-adherence to the treatment agreement is outlined." The claimant had multiple visits to the emergency room in order to obtain opioid.