

Case Number:	CM13-0069000		
Date Assigned:	01/03/2014	Date of Injury:	11/09/2011
Decision Date:	04/28/2014	UR Denial Date:	12/11/2013
Priority:	Standard	Application Received:	12/20/2013

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. The expert reviewer is Board Certified in Orthopedic Surgery and is licensed to practice in Texas and Mississippi. 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/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:

The most recent progress note, dated December 5, 2013, indicates that the claimant presents with continued right shoulder pain. The clinician notes that a previous request for Exalgo was denied. The clinician indicates that the Exalgo was prescribed secondary to two previous denials for MS Contin. A previous note, dated October 10, 2013, documents that the clinician was attempting to start the claimant on MS Contin. Although, in this same note the claimant indicates that Valium and Norco reduced the pain to 1/10. The clinician indicates that the purpose of these long-acting medications is to reduce the claimant's use of Norco, but does not reduce the Norco prescription noting potential denial of the MS Contin. The December 5, 2013 note documents that the claimant is tearful about the denial and notes that the medications, presumably Norco and Valium as MS Contin and Exalgo have not been authorized, assist with pain control and allow for activities of daily living. The pain is rated as 8-9/10 without medications and 1/10 with medications, the clinician does not indicate which medications, but presumably the Valium and Norco. The pain is noted to be aggravated with lifting and as being unchanged since the previous appointment. The physical exam documented tenderness to palpation about the anterior shoulder, supraspinatus, infraspinatus, trapezius, and deltoid. Range of motion of the shoulder is noted to be diminished in all planes secondary to pain. The patient declined strength testing. Neurovascular testing demonstrates normal sensation, pulse, and deep tendon reflexes in both upper extremities. The clinician indicates that up to 8 tablets of Norco 10/325 mg were being taken on a daily basis. Only 120 tablets were previously approved, and the clinician provided a 2nd prescription for an additional 120 tablets that the claimant intended to pay for out-of-pocket. The diagnoses for this visit are rotator cuff syndrome, proximal biceps rupture, AC joint arthritis, chronic pain syndrome, and muscle pain.

IMR ISSUES, DECISIONS AND RATIONALES

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

30 Exalgo 8mg: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 74-75.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids for Chronic pain Page(s): 74-96.

Decision rationale: The MTUS guidelines support the use of opioids for the treatment of chronic pain, but notes that opioids are rarely beneficial for mechanical or compressive etiologies and are not recommended as a first-line treatment for osteoarthritis. Additionally, the MTUS notes that "in most cases, analgesic treatment should begin with acetaminophen, aspirin, and NSAIDs (as suggested by the WHO step-wise algorithm). When these drugs do not satisfactorily reduce pain, opioids for moderate to moderately severe pain may be added to (not substituted for) the less efficacious drugs." Also, the MTUS recommends that the efficacy of opioids be evaluated by utilizing outcome measures including documentation of intensity of pain after the opioid is taken, how long it takes for pain relief achieved, and how long pain relief lasts. Additionally, it indicates that these medications should demonstrate some form of functional improvement. However, there is no documentation that aspirin or NSAIDs are being utilized in addition to the Norco and Valium. The MED of the Norco as prescribed is 80, and with the addition of the Exalgo (hydromorphone) 8mg this would increase the daily MED to 104. Based on the clinical documentation provided, the current medications being utilized for the treatment of osteoarthritis and mechanical etiologies. Also, the claimant is documented as having reduced pain to 1/10 with the current medication regimen, not including a long acting opioid. As such, based on the documentation provided the addition of Exalgo to the current medication regimen is not medically necessary.