

Case Number:	CM14-0000853		
Date Assigned:	01/22/2014	Date of Injury:	09/01/2002
Decision Date:	04/28/2014	UR Denial Date:	12/20/2013
Priority:	Standard	Application Received:	01/02/2014

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 Occupational Medicine and is licensed to practice in California. 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 patient is an employee of [REDACTED] School District and has submitted a claim for Cervicalgia associated with an industrial injury date of 09/01/2002. Treatment to date has included cervical spine operations, steroid injection, stimulator, radiofrequency ablation, Botox injection, and medications. Utilization review from 12/20/2013 denied the request for Amitiza 24mcg BID, #60 for constipation because the patient was already on Mira LAX (Polyethylene glycol) that can address the symptom. Medical records from 2005 to 2013 were reviewed showing that patient has been complaining of chronic cervical pain graded 7-9/10 radiating to her upper back, and shoulders. Intake of medications alleviated the pain to a grade of 4-5/10 for a limited duration. Patient also had numbness, tingling and weakness in the hands and feet. There was aching pain in her arms during brushing teeth, washing, or combing hair. Physical examination showed tension and tenderness throughout the posterolateral group, posterior and middle scalene. Cervical range of motion was limited to lateral tilt of 25 degrees with cervical rotation to 60 degrees bilaterally with end-range tightness. The patient had a head-forward position. Spurling's maneuver was negative. Deep tendon reflexes were equal and symmetric. Motor strength was 5/5 on all extremities. Sensation was intact. Current medications include Opana, Ambien, Trazodone, benazepril, Prempro, amlodipine, sertraline, Flonase inhaler, clonazepam, Bupropion, Lunesta, Amitiza, Meloxicam, polyethylene glycol, oxymorphone, Soma, and Nuvigil.

IMR ISSUES, DECISIONS AND RATIONALES

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

AMITIZA 24MCG BID FOR CONSTIPATION, #60: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 77.

Decision rationale: Page 77 of CA MTUS states that with opioid therapy, prophylactic treatment of constipation should be initiated. Lubiprostone (Amitiza) is used to relieve stomach pain, straining and produce softer bowel movements in people who have chronic constipation. In this case, the patient has been on chronic opioid therapy since 2005 which was the earliest progress note available for review. Since prophylactic treatment for constipation is provided for by applicable guidelines, the request for Amitiza meets the criteria. However, the patient was also prescribed with polyethylene glycol (MiraLAX) which is also being used for constipation. There was no documentation stating the need to provide two different medications for the sole purpose of prophylactically treating constipation in opioid usage. Therefore, the request for Amitiza 24mcg bid for constipation, #60 is not medically necessary and appropriate.