

Case Number:	CM14-0001338		
Date Assigned:	01/22/2014	Date of Injury:	07/10/2001
Decision Date:	04/07/2014	UR Denial Date:	12/11/2013
Priority:	Standard	Application Received:	01/03/2014

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 Physical Medicine and Rehabilitation has a subspecialty in Pain Management 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 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:

This is a male patient with a date of injury of July 10, 2001. A utilization review determination dated December 11, 2013 recommends noncertification of Lyrica and certification of Lidoderm patches. Lyrica is noncertified due to lack of documentation of neuropathic pain. A letter dated December 13, 2013 indicates that the patient's neuropathic pain is controlled on Lyrica and he is able to complete activities of daily living. Without the medication, he is unable to function. A progress report dated December 5, 2013 include subjective complaints indicating that the patient continues to have low back pain which is limiting his function. Lidoderm patches help with local pain control. The note indicates that the patient is willing to try Lyrica to improve his current pain control. There are no reported side effects from the current medication and no symptoms of abuse. Objective examination findings identify antalgic gait due to left hip pain and decreased strength on the left side. Limited range of motion is also identified. Diagnoses include pain in the pelvic region and thigh, lumbago, and cervicgia. Treatment plan recommends continuing Norco, begins Lyrica 75 mg increasing the dose over a 2 week period, restart lidoderm, and obtain an MRI of the lumbar spine. A progress report dated September 5, 2013 indicates that the patient is using Norco for pain control. A urine drug screen demonstrates compliance with the patient's current medication regimen.

IMR ISSUES, DECISIONS AND RATIONALES

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

Lyrica 75mg, #120: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines May 2009, Pregabalin(Lyrica®), no generic available).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 16-21 of 127.

Decision rationale: Regarding request for Lyrica, Chronic Pain Medical Treatment Guidelines state that antiepilepsy drugs are recommended for neuropathic pain. They go on to state that a good outcome is defined as 50% reduction in pain and a moderate response is defined as 30% reduction in pain. Guidelines go on to state that after initiation of treatment, there should be documentation of pain relief and improvement in function as well as documentation of side effects incurred with use. The continued use of AEDs depends on improved outcomes versus tolerability of adverse effects. Within the documentation available for review, it appears the patient is being initiated on Lyrica for neuropathic pain. The requesting physician has indicated that Lyrica improves the patient's pain and function (even after what appears to be only 8 days of use). Additionally, there does not appear to be any side effects or aberrant use. The patient has objective findings consistent with the diagnosis of neuropathic pain including decreased strength in a lower extremity. As such, the currently requested Lyrica is recommended for certification.