

Case Number:	CM14-0010257		
Date Assigned:	02/21/2014	Date of Injury:	04/14/2008
Decision Date:	06/25/2014	UR Denial Date:	01/03/2014
Priority:	Standard	Application Received:	01/23/2014

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 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 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:

This is a female patient with the date of injury of April 14, 2008. A utilization review determination dated January 3, 2014 recommends not medically necessary of 1 prescription Duexis 800mg/26.6mg #60 with 2 refills between 12/6/13 and 2/16/14. The previous reviewing physician recommended non-certification of 1 prescription Duexis 800mg/26.6mg #60 with 2 refills between 12/6/13 and 2/16/14 due to lack of documentation of measurable functional improvement as a direct result of previous use reported. A progress report dated December 6, 2013 identifies Subjective Complaints of ongoing pain to the right shoulder. She has pain to her mid back and low back which is causing increased difficulty with function and activity. She has tried the Duexis prescription with benefit. Objective Findings identify tenderness in the scapular area. There is reduced motion. Grip strength is reduced, and she has painful overhead reach. There is positive Hawkins', impingement maneuver, and Neer's signs. There is pain with cervical motion and motion is limited. Diagnoses identify status post anterior cervical discectomy and fusion, right shoulder impingement syndrome, L4-5 disc herniation with bilateral lower lumbar radiculopathy, and upper extremity overuse tendinopathy. Treatment Plan identifies prescription provided for Duexis 800 mg/26/6 mg #60 with 2 refills.

IMR ISSUES, DECISIONS AND RATIONALES

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

DUEXIS 800 MG/26.6 MG #60 WITH TWO REFILLS: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Chronic Pain Medical Treatment Guidelines 8 C.C.R. §§9792.20 - 9792.26 MTUS (Effective July 18,. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Pain Chapter, Duexis (ibuprofen and famotidine).

Decision rationale: Regarding the request for Duexis, Chronic Pain Medical Treatment Guidelines state that NSAIDs are recommended at the lowest dose for the shortest period in patients with moderate to severe pain. California MTUS states that proton pump inhibitors are appropriate for the treatment of dyspepsia secondary to NSAID therapy or for patients at risk for gastrointestinal events with NSAID use. ODG states Duexis is not recommended as a first-line drug. [REDACTED] recently announced the launch of Duexis, a combination of ibuprofen 800 mg and famotidine 26.6 mg, indicated for rheumatoid arthritis and osteoarthritis. With less benefit and higher cost, it would be difficult to justify using Duexis as a first-line therapy. Within the medical information available for review, there is no indication for the need for Duexis as opposed to ibuprofen and famotidine separately. The Guidelines do not recommend Duexis as a first-line drug. In light of the above issues, the currently requested Duexis is not medically necessary.