

Case Number:	CM14-0118104		
Date Assigned:	08/15/2014	Date of Injury:	08/01/2005
Decision Date:	10/01/2014	UR Denial Date:	07/03/2014
Priority:	Standard	Application Received:	07/25/2014

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 claimant was injured on 08/01/05. Duragesic patches 100mcg/hr prescribed on 06/19/14 are under review. She reportedly injured her hands, knees, wrists, left shoulder, psyche, and gastrointestinal system due to a trip and fall as well as repetitive stress in the wrists. She is permanent and stationary and retired. She has had physical therapy and psychotherapy sessions certified. On 06/03/13, Duragesic patches were not certified on appeal. There were ordered again on 06/13/13 and were not certified. Surgery was recommended on 08/28/13 with postop therapy. Additional therapy was ordered on 01/14/14 and her Duragesic patches were partially certified on 01/17/14. PT, 12 visits was non-certified on 02/14/14. There is a past MRI that showed multilevel degenerative disc disease and multilevel disc bulges with some effacement of the ventral epidural space. A urine toxicology screen was positive for Clonazepam on 08/29/11 which was inconsistent. Fentanyl was present in at least two drug screens. She is status post left shoulder surgery in 2006 and transforaminal epidural steroid injection of the lumbar spine on 04/09/07. She has had treatment with multiple medications, a TENS unit, PT, and Lidoderm and fentanyl patches. On 04/17/14, she still had pain in both upper extremities and both knees that was unchanged. She had a mood disorder and shoulder and extremity pain. Duragesic patches provided relief. She was awaiting more PT for her left elbow. Duragesic patches 100mcg/hr #15, Lyrica, Tegaderm HP dressing, Wellbutrin XL, lansoprazole, MiraLax, and lidocaine ointment were ordered. On 05/15/14, she remained on Duragesic patches. She received it again at the same dose on 06/19/14. Requests for Duragesic had previously been non-certified on multiple occasions due to inadequate documentation of her use and the benefit to her. On 06/19/14, the date in question, she was seen for bilateral upper extremity and knee pain. Her level of pain was unchanged but her activity level had increased. She was using Duragesic 100g per hour patches. She stated they were still providing pain relief but she was experiencing delays

in getting her medications. If the patches are abruptly discontinued she will go through withdrawal. She saw [REDACTED] on 07/17/14. She was on Duragesic 100g per hour patches every 2 days. Her pain was tolerable. The medication was refilled. She saw [REDACTED] on 08/14/14 for left shoulder pain, left elbow pain, and bilateral wrist pain. Her pain has decreased since her last visit. She wanted to taper the opiates. She remained on Duragesic patch 100g/hour every 2 days. It was to be tapered to 75g every 2 days.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective request for Duragesic 100mcg/hr patch QTY: 15.00 DOS 6/19/14: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Functional Improvement measures Criteria for use of opioids When.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids for Chronic Pain, 4 A's Page(s): 110.

Decision rationale: The history and documentation do not objectively support the request for Duragesic patch 100mcg/hr, #15 on 06/19/14. The MTUS outlines several components of initiating and continuing opioid treatment and states "a therapeutic trial of opioids should not be employed until the patient has failed a trial of non-opioid analgesics. Before initiating therapy, the patient should set goals, and the continued use of opioids should be contingent on meeting these goals." In these records, there is no documentation of trials and subsequent failure of or intolerance to first-line drugs such as acetaminophen or nonsteroidal anti-inflammatory drugs. MTUS further explains, "pain assessment should include: current pain; the least reported pain over the period since last assessment; average pain; intensity of pain after taking the opioid; how long it takes for pain relief; and how long pain relief lasts." There is also no indication that periodic monitoring of the claimant's response to this medication, other than that it helps, including assessment of pain relief and functional benefit, has been or will be done. There is no evidence that she has been involved in an ongoing rehab program to help maintain any benefits she received from treatment measures. Additionally, the 4A's "analgesia, activities of daily living, adverse side effects, and aberrant drug-taking behaviors" should be followed and documented per the guidelines. There is no evidence that a signed pain agreement is on file at the provider's office and no evidence that a pain diary has been recommended and is being kept by the claimant and reviewed by the prescriber. As such, the medical necessity of the ongoing use of Duragesic patches 100mcg/hour prescribed on 06/19/14 has not been clearly demonstrated.