MAXIMUS Federal Services

Case Number:	CM14-0153287		
Date Assigned:	09/23/2014	Date of Injury:	09/07/1993
Decision Date:	10/27/2014	UR Denial Date:	08/22/2014
Priority:	Standard	Application Received:	09/19/2014

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 applicant is a represented [redacted] employee who has filed a claim for chronic low back pain reportedly associated with an industrial injury of September 7, 1993.Thus far, the applicant has been treated with the following: Analgesic medications; opioid therapy; and transfer of care to and from various providers in various specialties. In a Utilization Review Report dated August 22, 2014, the claims administrator failed to approve a request for Duragesic, suggesting that the applicant taper off of the same. It was suggested that the applicant was using Duragesic 50-mcg patches in addition to Norco 10/325 #180 per month. The applicant's attorney subsequently appealed. In a progress note dated August 14, 2014, the applicant reported persistent complaints of pain. The applicant was reportedly walking two to three miles a day while using Norco and Duragesic, it was stated. The applicant was also using Flexeril for pain relief. The applicant reportedly had a narcotic contract. It was stated that the applicant will be unable to perform activities of daily living such as walking, cooking, and cleaning without his opioid agents. The applicant was asked to continue home exercises. Multiple medications were refilled. The applicant's work status was not provided. On September 17, 2014, the applicant was again described as stable on his current medication regimen. The applicant was walking two to three miles a day, despite ongoing complaints of low back and shoulder pain. The applicant was asked to continue Duragesic and Norco. The applicant was asked to continue home exercises.

IMR ISSUES, DECISIONS AND RATIONALES

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

Duragesic 50mcg Patches #10: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines When to Continue Opioids topic. Page(s): 51.

Decision rationale: As noted on page 80 of the MTUS Chronic Pain Medical Treatment Guidelines, the cardinal criteria for continuation of opioid therapy include evidence of successful return to work, improved functioning, and/or reduced pain achieved as a result of the same. In this case, the attending provider has established that the applicant's ability to perform activities of daily living, including household chores, cooking, cleaning, and performing home exercises have all been ameliorated through ongoing usage of Duragesic patches. The applicant is also deriving appropriate analgesia from the same; it has been written on several occasions. The applicant's ability to perform home exercises, including walk two to three miles daily, has likewise been ameliorated through ongoing Duragesic usage. Continuing the same on balance is therefore indicated. Accordingly, the request is medically necessary.