

<b>Case Number:</b>	CM14-0170957		
<b>Date Assigned:</b>	10/28/2014	<b>Date of Injury:</b>	08/09/2006
<b>Decision Date:</b>	12/10/2014	<b>UR Denial Date:</b>	10/07/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/16/2014

### 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 Anesthesiology, has a subspecialty in Pain Medicine and is licensed to practice in Connecticut. 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:

After careful review of the medical records, this is a 43-year-old female with complaints of chronic low back pain. The date of injury is 8/9/06 and the mechanism of injury was not elicited. At the time of request for OxyContin 80mg 1 tab three times day #90, there is subjective (chronic low back pain with increased crying spells; increased paresthesias; numbness, and weakness in the right LE), and objective (moderate depression and frustration; pressure over the facets at L5-S1 on the right side aggravated pain; tenderness at L3, L4, and L5 on the right side; moderate tenderness at thoracolumbar and lumbosacral junctions on right; mild tenderness at sacroiliac joint bilaterally; moderate tenderness over the piriformis muscle, anterior iliacus, anterior psoas tendon insertion, and greater trochanter on right; mild tenderness at the tarsal-metatarsal articulations bilaterally; mildly tender and swollen achilles tendons; excessive tenderness to touch on the right calf; and tenderness in calves on both sides) findings. The current medications are Lamictal, Docusate, Omeprazole, Cymbalta OxyContin, zolpidem, and Amrix. The diagnoses include chronic lower back pain with muscle spasm and radiculopathies, right more than left, radiculopathic pain radiating from lumbosacral spine to both LE, opioid induced constipation, pain induced depression partially controlled with Cymbalta, and gastrointestinal irritation and gastroesophageal reflux disorder aggravated by prolonged intake of nonsteroidal anti-inflammatory medications and analgesic medications. The treatment to date (8-year course of treatment for low back complaints including chronic opioid therapy, antidepressants, anticonvulsants, NSAIDs, muscle relaxants and sedative/hypnotics, as well as activity restrictions, and other modalities with overall 50% improvement. Since February 2014 to till date OxyContin has decreased pain by 50% and abetted symptoms by over 50%).The request for OxyContin 80mg 1 tab three times day #90 was denied on 10/07/14.

## IMR ISSUES, DECISIONS AND RATIONALES

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

**Oxycontin 80mg 1 tab three times day #90:** Overturned

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 74, 86, 91.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 74-84, 91-92, 97.

**Decision rationale:** As per CA MTUS guidelines, OxyContin is a controlled, extended and sustained release preparations should be reserved for patients with chronic pain, who are need of continuous treatment. Guidelines indicate that "four domains have been proposed as most relevant for ongoing monitoring of chronic pain patients on opioids; pain relief, side effects, physical and psychosocial functioning, and the occurrence of any potentially aberrant (or non-adherent) drug-related behaviors. These domains have been summarized as the "4 A's" (analgesia, activities of daily living, adverse side effects, and aberrant drug-taking behaviors)." The medical records indicate that opioid prescribing protocols were fulfilled with efficacy established. Therefore, the medical necessity for Oxycontin80mg # 90 is established based on guidelines. The request is considered medically necessary.