

Case Number:	CM14-0175887		
Date Assigned:	10/28/2014	Date of Injury:	08/20/2009
Decision Date:	12/05/2014	UR Denial Date:	10/07/2014
Priority:	Standard	Application Received:	10/23/2014

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 Anesthesiology, has a subspecialty in Pain Management, and is licensed to practice in Georgia. 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 patient is a 39 year old male presenting with a work related injury on 08/20/09. The patient has tried back brace medications including Nucynta and Amitiza. The patient complained the constipation with medication. Patient reported that when the Nucynta was stopped the pain went back to 8/10. The physical exam revealed that the patient moved in a guarded fashion. The provider noted that Nucynta gives the patient steady pain control with the least amount of effects. Amitiza was prescribed to control the constipation. Patient was diagnosed with low back pain with disk protrusion, L5-S1, right sciatica and lumbar degenerative disk disease. A claim was made for Nucynta and Amitiza.

IMR ISSUES, DECISIONS AND RATIONALES

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

Nucynta ER (quantity and dose of medication not indicated): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG Pain (updated 10/02/14), Tapentadol (Nucynta)

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 79.

Decision rationale: Nucynta ER (quantity and dose of medication not indicated) is not medically necessary. Per MTUS Page 79 of MTUS guidelines states that weaning of opioids are recommended if (a) there are no overall improvement in function, unless there are extenuating circumstances (b) continuing pain with evidence of intolerable adverse effects (c) decrease in functioning (d) resolution of pain (e) if serious non-adherence is occurring (f) the patient requests discontinuing. The claimant's medical records did not document that there was an overall improvement in function or a return to work with previous opioid therapy. The claimant has long-term use with this medication and there was a lack of improved function with this opioid; therefore requested medication is not medically necessary.

Amitiza 24 mcg (quantity and dose of medication not indicated): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG Pain (updated 10/02/14), Lubiprostone (Amitiza)

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 77. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: Physician Desk Reference

Decision rationale: Amitiza 24 mcg (quantity and dose of medication not indicated) is not medically necessary. Amitiza is a medication used for chronic idiopathic constipation. Per CA MTUS page 77 of the Opioid section: Initiating Therapy: Prophylactic treatment of constipation should be initiated; however, first-line medications are recommended. As it relates to this case, the patient was prescribed Amitiza for opioid related constipation. There is a lack of medical necessity for opioids. Additionally, there is lack of documentation of failure of first-line medications for opioid induced- constipation; therefore, based on CA MTUS guidelines and review of the medical records, Amitiza is not medically necessary.