

Case Number:	CM14-0031116		
Date Assigned:	06/20/2014	Date of Injury:	07/02/2009
Decision Date:	07/18/2014	UR Denial Date:	02/10/2014
Priority:	Standard	Application Received:	03/12/2014

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 Internal 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 patient had a worker comp injury in 7/2/09 which resulted in chronic back pain. On 6/19/13 he was noted by his PTP to have depression and insomnia. He was noted on subsequent reports to be on wellbutrin, neurontin, soma , norco, atarax, and lunesta 3 mg for sleep. Since the 6/19/13 report no mention was noted to be made about the patient's sleep, possible side effects of medication, or plan to titrate the dose of lunesta down. On 2/10/14 the request for authorization of lunesta was denied, citing lack of documentation of discussion of sleep hygiene or any mention of the effect of lunesta in aiding sleep.

IMR ISSUES, DECISIONS AND RATIONALES

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

Lunesta 3 mg #35: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG- Lunesta.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation the authoritative internet medical resource, Up to Date, Topic 7691 Version 24 and Topic 8830 Version 97.0.

Decision rationale: Up to Date states that insomnia should be first treated with sleep hygiene and counseling. Such techniques such as relaxation, cognitive therapy, behavior modification, and stimulus control are all advocated as first line treatment. Also, screening for such other problems as depression should be done. When lunesta is used the smallest dose of 1 or 2 mg

should be used first. Lunesta had the longest half life of all the sleep agents and can still be active 11 hours after use. It could cause problems with driving, memory, and coordination and caution should be used, especially with the 3 mg dose. Also, caution should be used with treatment for insomnia linked to depression. We note the chart notes do not present that any attempt was first made with sleep hygiene or techniques designed to behaviorally help sleep. Also, the patient was on the 3 mg dose of lunesta which is noted to possibly be especially dangerous for driving and coordination. Lastly, the patient has a concomitant diagnosis of depression treated with wellbutrin. We note insomnia is often derived from depression and there are antidepressant agents which treat both depression and insomnia but no mention is made of the attempt to utilize any of these agents. We also note that the patient is on a variety of meds which cause sedation, including neontin, soma, norco, and atarax, and the combined effect could be especially dangerous. Due to all the above factors it is considered that the denial of authorization for the use of lunesta 3 mg was appropriate and was that the use of lunesta was not medically necessary.