

Case Number:	CM14-0038203		
Date Assigned:	06/25/2014	Date of Injury:	11/15/1996
Decision Date:	08/27/2014	UR Denial Date:	03/11/2014
Priority:	Standard	Application Received:	04/01/2014

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 Texas and Florida. 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 46 year old male who was injured on 11/15/1996. The diagnoses are migraine headache, low back pain, neck pain and mild traumatic brain injury. The patient completed biofeedback and Botox injections. There is an implanted pain pump that is dispensing morphine. The patient is also utilizing Exalgo 16mg bid #60 dispensed at [REDACTED] office. [REDACTED]. [REDACTED] noted that the patient is bed bound when Exalgo was discontinued but able to function and improve ADL when utilizing pain medications. The patient is utilizing Marinol for opioid associated nausea and vomiting. The patient was noted to have failed treatment with Reglan, Compazine, phenergan and Zofran. [REDACTED] is managing the implanted morphine pump. The patient is utilizing Provigil for the prevention and treatment of opioid induced daytime somnolence and sedation. A Utilization Review determination was rendered on 3/11/2014 recommending modified certification for Marinol 10mg #120 and Provigil 200mg #30 from 5 refills to no refill.

IMR ISSUES, DECISIONS AND RATIONALES

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

Exalgo Extended Release 16mg One by mouth twice a day #60: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official disability guidelines ,Hydromorphone.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines 9792.42.2.

Decision rationale: The CA MTUS recommend that opioids can be utilized in the management of exacerbations of pain that is non responsive to treatment with NSAIDs, PT and exercise. Long term opioid administration can lead to development of tolerance, addiction, opioid induced hyperalgesia and complications such as oversedation, daytime somnolence cognitive dysfunction. The records indicate that the patient is utilizing opioids from 2 independent prescribers. [REDACTED] is prescribing oral Exalgo while [REDACTED] maintains the patient on an implanted opioid delivery pump. The patient is exhibiting significant opioid side effects requiring treatments with Provigil and Marninol. The request is not medically necessary.

Provigil 200mg Daily #30 ,5 Refills: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.webmd.com/drugs/drug-16964-provigil.aspx>.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain Chapter.

Decision rationale: The CA MTUS recommend that opioids dosage reduction is first step in the management of excessive sedation or somnolence associated with chronic opioid treatment. The use of high dose opioid medications can lead to opioid induced hyperalgesia and complications such as oversedation, daytime somnolence and cognitive dysfunction. The records indicate that the patient is utilizing opioids from 2 independent prescribers. [REDACTED] is prescribing oral Exalgo while [REDACTED] maintains the patient on an implanted opioid delivery pump. The patient is exhibiting significant opioid side effects requiring treatments with Provigil and Marninol. The request is not medically necessary.