

<b>Case Number:</b>	CM14-0038466		
<b>Date Assigned:</b>	07/11/2014	<b>Date of Injury:</b>	10/03/1988
<b>Decision Date:</b>	09/17/2014	<b>UR Denial Date:</b>	03/26/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	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 Physical Medicine and Rehabilitation and is licensed to practice in Texas and Ohio. 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 injured worker is a 60-year-old male who reported an injury on 10/03/1988. While doing his work as an iron worker foreman, he bent over to pick up a 20 pound box, when he felt a pop in his lower back. Diagnoses were chronic low back pain secondary to multilevel lumbosacral degenerative disc disease, severe neuropathic pain, chronic pain syndrome, lumbar radiculopathy, and opioid dependence. Past treatments have been medications, epidural steroid injections, and physical therapy. Surgical history was lumbar discectomy in 1988 and total knee arthroplasty in 2008. Physical therapy on 03/27/2014 revealed feelings of frustration from the injured worker. The injured worker was upset because his insurance did not cover his Adderall. Examination revealed decreased lumbar range of motion in flexion, extension, and side bending. The injured worker does not use any assistive device. There was tenderness noted on palpation to his lumbar paraspinals. Motor strength for the lower extremity was 5/5, proximal and distal. Sensation was intact. Medications were Norco and Adderall. Treatment plan was to take medications as directed. It was stated that the injured worker has been on this medication for quite a while now. The injured worker had been diagnosed with chronic, intractable low back pain secondary to multilevel lumbosacral degenerative disc disease. With medication, the injured worker is able to function at home. He is able to do home chores, participate in family business, exercise, do grocery shopping, and do hobbies. Without pain medication, the injured worker would be bed bound due to severe back pain. The injured worker takes the Adderall due to the opioid effect of tiredness. The request for authorization was not submitted.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Adderall 10mg one four times a day:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 78-90. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain Chapter.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Rx.com: <http://www.drugs.com/adderall.html>.

**Decision rationale:** The request for Adderall 10 mg 1 tablet 4 times a day is non-certified. This request was not addressed by the California Medical Treatment Utilization Schedule, ACOEM, or the Official Disability Guidelines, so it had to be looked up elsewhere. Adderall is a combination of amphetamine and dextroamphetamine. They affect the central nervous system as stimulants and they effect chemicals in the brain and nerves that contribute to hyperactivity and impulse control. Adderall is used to treat narcolepsy and attention deficit hyperactivity disorder. Adderall may also be used for purposes not listed in this medication guide. Amphetamine and dextroamphetamine may be habit forming. Some stimulants have caused sudden death in people with serious heart problems or congenital heart defects. Due to the fact that the medical necessity for this medication was not reported, the request is non-certified.