

Case Number:	CM14-0052186		
Date Assigned:	07/07/2014	Date of Injury:	06/26/2003
Decision Date:	09/05/2014	UR Denial Date:	04/02/2014
Priority:	Standard	Application Received:	04/21/2014

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 Tennessee. 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:

This is a 63-year-old male with a 6/26/03 date of injury, when he injured his bilateral upper extremities and right shoulder while performing his normal work duties. The progress reports dated from 10/14/13 to 3/5/14 stated that patient complained of depression, frustration, stress and sleep disturbances. The progress note dated 1/9/14 indicated that the patient complained of chronic 8/10 low back pain. His mood was 7/10 and he had poor sleep quality. The patient's opiates were reduced and Nucynta was started. He continued to use THC for pain. Exam findings revealed that the patient has been taking the medication for many years and that they help him. The progress note dated 5/12/14 stated that the patient was using Ambien, which greatly improved his sleep allowing him to sleep 3-4 hours longer. The patient was seen on 5/15/14 with complains of chronic low back pain radiating to the right buttock and left leg. He also reported tingling in his hands. The exam findings revealed low back pain and the patient ambulated with a cane. The diagnosis is depression, anxiety, lumbago and insomnia. Treatment to date: bilateral carpal tunnel release, right shoulder arthroscopy, 26 sessions of PT, multiple ESI injections, medications and psychotherapy. An adverse determination was received on 4/2/14. The request for Ambien 5mg #30 was denied because the patient exceeded recommended time of the treatment due to the guidelines and it was a lack of documentation indicating how Ambien helped the patient with his sleeping difficulties.

IMR ISSUES, DECISIONS AND RATIONALES

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

Ambien 5mg #30: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines - Pain Chapter : FDA (Ambien).

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, Ambien) FDA (Ambien).

Decision rationale: The California MTUS does not address this issue. ODG and the FDA state that Ambien is approved for the short-term (usually two to six weeks) treatment of insomnia. Additionally, pain specialists rarely, if ever, recommend Ambien for long-term use. Hypnotics should generally be limited to 7 to 10 days of use and evaluation of the patient is recommended if they are to be taken for more than 2 to 3 weeks. The progress note dated 5/15/14 indicated that the patient has been using Ambien and his sleep improved. However the Guidelines clearly state that Ambien should not be used for longer than 3 weeks. There is a lack of documentation indicating that the patient was evaluated after 2-3 weeks period of treatment with Ambien. In addition, per FDA Guidelines, there is also concern that hypnotics may increase pain and depression over the long-term and it is known, that the patient suffers from depression as well. Therefore, the request for Ambien 5mg #30 was not medically necessary.