

Case Number:	CM14-0066954		
Date Assigned:	07/11/2014	Date of Injury:	01/31/2003
Decision Date:	08/14/2014	UR Denial Date:	04/29/2014
Priority:	Standard	Application Received:	05/09/2014

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 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:

According to the records made available for review, this is a 40-year-old female with a 1/31/03 date of injury. At the time (4/15/14) of the request for authorization for Exalgo ER 12 mg #90, there is documentation of subjective (lower backache) and objective (extensor hallucis longus, ankle dorsiflexors, ankle plantar flexors, knee extensors, knee flexors, and hip flexors are 2/5 on both sides; light touch sensation is decreased over lateral foot, medial foot on both sides; dysesthesias are present over lateral thighs on both sides) findings, current diagnoses (postlumbal laminectomy syndrome, low back pain, fibromyalgia and myositis not otherwise specified, spasm of muscle, and mood disorders other), and treatment to date (medication including Exalgo for at least 5 months). In addition, there is documentation that the patient has signed an appropriate pain contract and medication optimizes function and activities of daily living.

IMR ISSUES, DECISIONS AND RATIONALES

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

Exalgo ER 12 mg #90: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Pain Chapter.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids
Page(s): 74-80.

Decision rationale: MTUS Chronic Pain Medical Treatment Guidelines necessitate documentation that the prescriptions are from a single practitioner and are taken as directed; the lowest possible dose is being prescribed; and there will be ongoing review and documentation of pain relief, functional status, appropriate medication use, and side effects, as criteria necessary to support the medical necessity of opioids. MTUS-Definitions identifies that any treatment intervention should not be continued in the absence of functional benefit or improvement as a reduction in work restrictions; an increase in activity tolerance; and/or a reduction in the use of medications or medical services. Within the medical information available for review, there is documentation of diagnoses of left sided hemiplegia. In addition, there is documentation of treatment with Exalgo for at least 5 months. In addition, there is no documentation that the prescriptions are from a single practitioner and are taken as directed; the lowest possible dose is being prescribed; and there will be ongoing review and documentation of pain relief, functional status, appropriate medication use, and side effects. Furthermore, given documentation that medication optimizes function and activities of daily living, there is documentation of functional benefit or improvement as an increase in activity tolerance. Therefore, based on guidelines and a review of the evidence, the request for Exalgo ER 12 mg #90 is medically necessary.