

Case Number:	CM14-0092781		
Date Assigned:	08/01/2014	Date of Injury:	09/19/1998
Decision Date:	11/10/2014	UR Denial Date:	06/11/2014
Priority:	Standard	Application Received:	06/19/2014

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 Family Medicine and is licensed to practice in New York. 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 worker sustained an injury 19Sep1998, to her low back while handling freight. For the visit 14May2014, for which the current question with regard to the medical necessity for the use of Modafinil (Provigil), found the worker reporting that she was getting worse. She had to sit down every few minutes, developed pain more quickly when standing and had to sit down sooner than before. The worker had been unable to work since 2000. There is no documented examination of the musculo-skeletal system at that visit. The injured worker is reported as awake, alert, well developed, well groomed and well nourished. The diagnoses used at the visit include Lumbago and Mononeruitis - Arm - Unspecified. The current medication list included OxyContin 80mg 10 tabs daily (no amount listed), Valium 5mg 1 tab daily 30, no refills, Oxycodone 5 mg 6 tabs daily, 180, no refills, Clonidine 0.1mg 2 tabs at bedtime, 60, 2 refills, Lisinopril 10 mg, 1 tab daily, 90, 2 refills and Provigil 200mg 1 tab in the morning, 30, no refills. The problem list covered 17 diagnoses listed as active primarily focusing on pain involving the length of the spine, neuritis and psychotic disorder. An MRI of the Cervical spine dated 11Dec2013 reports an anterior fusion from C4-7 with prominent bilateral neuroforaminal compromise at C4-5 and C5-6, moderate neuroforaminal compromise on the right at C2-3 and C3-4 and central spinal stenosis greatest on the right at C5-6. An EMG from 18Mar2014 confirmed a moderate right carpal tunnel syndrome and a chronic bilateral cervical radiculopathy. The treating provider indicated that in consultation with a surgeon that it was felt that no further surgical interventions in the neck would be likely to improve the current situation and that medical management was the only option. The request for the use of Modafinil (Provigil) 200 mg 1 daily in the AM, 30 tabs, was made under the diagnosis of Lumbago and dated 17Jun2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Modafinil (Provigil) 200mg #30 dispensed on 05/17/2014: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence

Decision rationale: The class of agents of concern is not covered in the MTUS or ODG guidelines. Provigil has FDA approved indications for use with Narcolepsy, Obstructive Sleep Apnea, Shift Worker Sleep Disorder and Fatigue, MS Related. It has a long list of potentially serious adverse reactions that include, Anaphylaxis, Angioedema, Syncope, Mania, Dependency and Abuse and Psychosis. This information has been derived from the manufacturers ([REDACTED]) approved medication insert. At no location in any of the available provider notes is any allusion made as to the potential utility of this medication in the original decision to utilize Provigil. There are no reports of the results of any trial of use and to any beneficial effects or adverse events (such as Mania or Psychosis). There are no questions during any of the visits as to its continuing benefit, if any, and consideration for modification or discontinuation of use. With the provided documentation that the patient when seen was awake and alert and with no mention of sedation or sleepiness it is difficult to discern a rationale for its selection and use under the diagnosis of Lumbago. There appears to be no FDA approved indication for its use, no medical necessity/utility shown and therefore the Modafinil (Provigil) 200mg #30 dispensed on 05/17/2014 is not medically necessary and appropriate.