MAXIMUS Federal Services

| Case Number: | CM14-0195277 | | |
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| Date Assigned: | 12/03/2014 | Date of Injury: | 06/25/2009 |
| Decision Date: | 01/15/2015 | UR Denial Date: | 11/12/2014 |
| Priority: | Standard | Application Received: | 11/21/2014 |

## 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 Internal Medicine 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:

The injured worker (IW) is a 49-year-old man with a date of injury of June 25, 2009. The mechanism of injury was not documented in the medical record. The current working diagnoses include internal derangement of knee; pain in joint involving lower leg; depressive disorder; and chronic pain.Pursuant to the progress noted dated October 10, 2014, the IW reports that pain is somewhat improved with the current pain regimen and is using Butrans patch correctly. Physical exam reveals abnormal, antalgic gait. The IW walks with a cane. He has a forward flexed posture. He has full extension and full rotation of the cervical and lumbar spine. The treatment plan includes increasing Butrans patch to 20mcg, and adding Dilaudid 2mg, #120 on October 10, 2014. The IW has been using Butrans patch since at least July 17, 2014. The provider has been gradually increasing the dosage in order to provide the IW with better pain relief. Alprazolam 0.25mg was added to the medication regimen November 4, 2014. The IW is also taking Norco 10/325mg, and Lidoderm patch 5%. The IW has been taking Norco 10/325mg since at least August 13, 2013 according to documentation. At one time or another (dated not provided) during the course of treatment, the IW has taken Hydrocodone, Oxycodone, Tramadol, Morphine, Fentanyl, Hydromorphone, Methadone, and Oxymorphone.

## IMR ISSUES, DECISIONS AND RATIONALES

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

**Butrans patch 20 mcg/hr #4 with 3 refills:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

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

**Decision rationale:** Pursuant to the Official Disability Guidelines, Butrans patch 20 mcg/hr #4 with three refills is not medically necessary. Butrans is recommended as an option for treatment of chronic pain in selected patients (not first line for all patients). Treatment should be reserved for use by clinicians with experience. The drug has both agonist and antagonist properties. There is a potential to precipitate withdrawal opioid experienced patients. In this case, the injured worker is 49 years old the date of injury June 25, 2009. The earliest date Butrans was refilled or first prescribed was July 17, 2014. Treating physician has increased the dosing since starting the drug back in July. Norco was started on August 13th 2014. Dilaudid was started on October 10th 2014. Alprazolam (a benzodiazepine) was started in November 2014. There is no clinical rationale in the medical record for the combined use of Norco, plus Dilaudid in addition to Butrans. While increasing Butrans, the dosing of other opioids should be reduced. The medical record documentation indicates a progressive increase in opiate use with both Norco and Dilaudid. Consequently, absent the appropriate clinical indication for the use of Butrans, the Butrans patch 20mcg/hr #4 with three refills is not medically necessary.

**Dilaudid 2 mg #120 with 1 refill:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opiates Page(s): 74-96. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG); Pain Section, Opiates

**Decision rationale:** Pursuant to the Chronic Pain Medical Treatment Guidelines and the Official Disability Guidelines, Dilaudid 2 mg #120 with one refill is not medically necessary. Ongoing, chronic opiate use requires an ongoing review and documentation of pain relief, functional status, appropriate medication use and side effects. A detailed pain assessment should accompany ongoing chronic opiate abuse. Satisfactory response to treatment may be indicated by the patient decrease pain, increase level of function or improve quality of life. In this case, the date of injury is June 25 of 2009. The injured worker is a 49-year-old man. He is status post total knee replacement. The injured worker was started on Butrans on July 17, 2014. The injured worker was started on Norco on August 13, 2014. The injured worker was then started on Dilaudid on October 10, 2014. The injured worker was then started on Alprazolam (benzodiazepine) on November 2014. There is no clinical indication rationale explaining why multiple narcotic opiates are prescribed to the injured worker while using the Butrans patch. The dose of narcotics such as Norco and Dilaudid should be decreasing. Additionally, benzodiazepine (Alprazolam) is an additive effect to the opiate effect. A review of the medical record shows the injured worker, at one time or another, during the course of treatment took

Hydrocodone, Oxycodone, Tramadol, Morphine, Fentanyl, Hydromorphone, Methadone, Oxymorphone. Consequently, absent the appropriate clinical documentation and clinical rationale for multiple opiates while using Butrans patch, Dilaudid 2 mg #120 with 1 refill is not medically necessary.