

Case Number:	CM14-0195789		
Date Assigned:	12/03/2014	Date of Injury:	04/12/2003
Decision Date:	01/20/2015	UR Denial Date:	10/28/2014
Priority:	Standard	Application Received:	11/24/2014

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 & Rehabilitation, has a subspecialty in Pain 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:

This is a male patient with a date of injury of April 12, 2003. A utilization review determination dated October 28, 2014 recommends non-certification of Savella 50 mg #60. A progress note dated October 17, 2014 identifies subjective complaints of increased pain, and decreased use of Fentora 100 g that has led to more pain. The patient is currently taking Lyrica 300 mg b.i.d. for neuropathy, sleep, and opiate potentiating, docusate sodium as needed for opiate induced constipation, Savella 50 mg b.i.d. for pain and depression, and Exalgo 32mg have been controlling his pain very well. The patient rates is pain between a 6-7/10, his pain in his left arm has been rising steadily and is constant, he has bilateral hand spasms with gripping, his pain is chronic and persistent, pain is worsened with activity, and his pain is relieved with medications and with spinal cord stimulator. The physical examination identifies that the patient appears dysthymic, affect is appropriate, judgment appears intact, and Hamilton depression assessment scale given previously was a score of 24 which is very severe depression. The diagnoses include opiate induced hypogonadism, cervicgia, cervical spondylosis, pain in joint involving hand, opiate induced constipation, adjustment disorder with depressed mood, tenosynovitis of the left elbow, lesion of the left shoulder nerve, and chronic pain syndrome. The treatment plan recommends a prescription refill for Exalgo 32mg #60, prescription for docusate sodium 100mg #180, prescription for Savella 50 mg #60, continue with Lyrica 300 mg #16, prescription for Fentora 100 g #270, opiate induced hyperalgesia was discussed and weaning of opiates was recommended, authorization for four acupuncture sessions were received, the patient is to continue with spinal cord stimulator, and the patient is to continue with psychological treatment.

IMR ISSUES, DECISIONS AND RATIONALES

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

Savella Tab 50mg # 60: 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 Official Disability Guidelines (ODG) Chronic Pain Chapter, Antidepressants for Chronic Pain

Decision rationale: Regarding the request for Savella 50mg #60, ODG recommends tricyclic antidepressants, Cymbalta, and venlafaxine as an option in first-line treatment of neuropathic pain. Savella is a member of the Selective serotonin and norepinephrine reuptake inhibitors (SNRIs) class of antidepressants. Guidelines indicate that a lack of response to antidepressant medications may indicate other underlying issues. Within the documentation available for review, there is no identification that the Savella provides any specific analgesic effect (in terms of reduced numeric rating scale or percent reduction in pain), or provides any objective functional improvement, reduction in opiate medication use, or improvement in psychological well-being. Additionally, there is no indication that the patient has tried and failed first-line treatment medications. In the absence of clarity regarding those issues, the currently requested Savella 50mg #60 is not medically necessary.