

Case Number:	CM14-0196214		
Date Assigned:	12/04/2014	Date of Injury:	09/09/1998
Decision Date:	03/05/2015	UR Denial Date:	10/19/2014
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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: Texas, Florida

Certification(s)/Specialty: Anesthesiology, Pain Management

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 who suffered an industrial related injury on 9/9/98. A physician's report dated 6/10/14 noted the injured worker had complaints of low back pain. He was taking Zohydro ER, Losartan, Furosemide, Fluocinonide, Tramadol, Trocin, Butrans, Celebrex, Prilosec, Benicar, Lunesta, Norvasc, Coreg, Neurontin, Lipitor, Glucophage, Aristocort, Potassium Chloride, and Viagra. Diagnoses included chronic pain syndrome, lumbar facet joint pain, lumbar degenerative disc disease, low back pain, lumbar strain, thoracic or lumbosacral neuritis or radiculitis, gastroesophageal reflux disease, and abdominal pain. A physician's report dated 10/8/14 noted chiropractic treatments were helpful for flare-ups. The physician noted Zohydro ER was helpful in reducing pain and increasing function. Physical examination findings included 5/5 bilateral lower extremity strength, intact and equal sensation. Patrick's sign and Gaensien's maneuver were negative. Tenderness over the paraspinalis and increased pain with flexion and extension were noted. The straight leg raise was positive on the left. On 10/19/14 the utilization review physician denied the request for Zohydro ER 30mg #60. The UR physician noted there was no documentation of urine drug screens, opioid agreements, or the state databases being checked within the medical records. Therefore the request was denied.

IMR ISSUES, DECISIONS AND RATIONALES

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

Zohydro ER 30mg #60: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines 9792.24.2Opioids Page(s): 42-43, 74-96, 124. Decision based on Non-MTUS Citation Pain Chapter Opioids

Decision rationale: The CA MTUS and the ODG guidelines recommend that opioids can be utilized for the treatment of severe musculoskeletal pain when standard treatment with NSAIDs and PT have failed. The chronic use of opioids is associated with the development of tolerance, dependency, addiction, sedation, opioids induced hyperalgesia and adverse interaction with sedative medications. The risks of opioids complications is significantly increased with utilization of multiple opioids and sedatives. The records indicate that the patient is utilizing multiple opioids and sedative medications. The subjective, objective and radiological findings are not consistent with a diagnosis of severe musculoskeletal pain. There is no documentation of guidelines recommended compliance monitoring such as random UDS, absence of aberrant behavior or 'red flag' conditions or functional restoration. The criteria for the use of Zohydro ER 30mg #60 was not met. The guidelines recommend that a safe weaning protocol be utilized when patients are weaned from high dose opioids medications.