

<b>Case Number:</b>	CM14-0203446		
<b>Date Assigned:</b>	12/15/2014	<b>Date of Injury:</b>	03/27/1999
<b>Decision Date:</b>	02/04/2015	<b>UR Denial Date:</b>	11/21/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	12/05/2014

### 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 Neurology, has a subspecialty in Neuromuscular Medicine and is licensed to practice in New Jersey. 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 patient is a 48 year old woman who sustained a work-related injury on March 27 1999. Subsequently, the patient developed a chronic pain for which she was treated with Wellbutrin and Lyrica. According to a progress report dated on October 15 2014, the patient was complaining of ongoing pain syndrome with pain severity rated 7-8/10 without medications and 4/10 with medications. The patient physical examination demonstrated cervical tenderness with reduced range of motion. The provider requested authorization for the following medications.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Floriset #90:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Barbiturate-containing analgesic agents (BCAs) Page(s): 23.

**Decision rationale:** Floriset is a Barbiturate-containing analgesic agents (BCAs). Per MTUS guidelines: "Barbiturate-containing analgesic agents (BCAs). Not recommended for chronic pain. The potential for drug dependence is high and no evidence exists to show a clinically important enhancement of analgesic efficacy of BCAs due to the barbiturate constituents.

(McLean, 2000) There is a risk of medication overuse as well as rebound headache. (Friedman, 1987)." There is no documentation of chronic headaches and no justification for long term use of Floricet. Therefore, the prescription for Floricet #90 with Codeine is not medically necessary.

**Wellbutrin XL 150MG #90:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Bupropion Page(s): 16.

**Decision rationale:** According to MTUS guidelines, Wellbutrin (Bupropion) showed some efficacy in the treatment of neuropathic pain. However there is no evidence of its effectiveness in chronic neck and back pain. Based on the above, the prescription of Wellbutrin XL 150MG # 90 is not medically necessary.

**Lyrica 100MG #90:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Lyrica Page(s): 20.

**Decision rationale:** Per MTUS guidelines, "Lyrica is an anti-epilepsy drug (AEDs - also referred to as anti-convulsant), which has been shown to be effective for treatment of diabetic; painful neuropathy and post-therapeutic neuralgia; and has been considered as a first-line treatment for neuropathic pain." There is no clear documentation of neuropathic pain in this patient that required and responded to previous use of Lyrica. In addition, the patient was prescribed Gabapentin and there is no documentation of side effects or failure of Gabapentin. There is no clear proven efficacy of Lyrica for neck pain. Therefore, Lyrica 100mg # 90 is not medically necessary.