

Case Number:	CM14-0203738		
Date Assigned:	12/16/2014	Date of Injury:	08/04/1988
Decision Date:	02/09/2015	UR Denial Date:	11/28/2014
Priority:	Standard	Application Received:	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 Occupational 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 applicant is a represented [REDACTED] beneficiary who has filed a claim for chronic low back pain reportedly associated with an industrial injury of August 4, 1988. In a utilization review report dated November 28, 2014, the claims administrator denied a request for Butrans patches apparently requested on November 21, 2014, while approving a prescription for Norco also requested on the same day. Non-MTUS ODG Guidelines were invoked, despite the fact that the MTUS addressed the topic at hand. In a June 27, 2014 progress note, the applicant reported persistent complaints of low back pain, myofascial pain syndrome, and chronic low back pain. The attending provider expressed concern that the applicant was using opioids other than those prescribed and was using drugs in excess of prescribed amounts. The applicant's stated medication list included Lyrica, Norco, and Soma. The applicant was not employed, it was stated. On July 10, 2014, the applicant's neurosurgeon noted that the applicant had undergone multiple lumbar spine surgeries. In a September 23, 2014 progress note, the applicant reported ongoing complaints of chronic neck and low back pain status post earlier cervical and lumbar fusion surgery. The applicant's medication list included Norco and Lyrica, it was stated. Urine drug testing was endorsed. On July 11, 2014, the applicant apparently went to the emergency department to obtain medication refills owing to her having exhausted her pain medications early. On November 21, 2014, Butrans and Norco were prescribed. It was not clearly stated for what purpose the Butrans was being employed on this occasion. In an earlier note dated October 22, 2014, the attending provider stated that he was introducing Butrans for chronic continuous low back pain. Norco and Lyrica were also renewed. The applicant was using Norco at a rate of six tablets a day.

IMR ISSUES, DECISIONS AND RATIONALES

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

Butrans 20 MCG #4 Qty 4: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Buprenorphine Page(s): 26.

Decision rationale: No, the request for Butrans (buprenorphine) was not medically necessary, medically appropriate, or indicated here. While page 26 of the MTUS Chronic Pain Medical Treatment Guidelines does acknowledge that buprenorphine or Butrans is recommended in the treatment of opioid addiction and/or for chronic pain purposes in applicants who have previously detoxified off other opioids, in this case, however, there was no history of detoxification from other opioids. The fact that the applicant was concurrently using Norco, another opioid, implied that buprenorphine or Butrans was not being employed for the purposes of treating opioid addiction and/or for the purposes of weaning the applicant off opioids altogether. Therefore, the request was not medically necessary.