

Case Number:	CM14-0077163		
Date Assigned:	07/18/2014	Date of Injury:	03/11/2013
Decision Date:	01/05/2015	UR Denial Date:	05/21/2014
Priority:	Standard	Application Received:	05/27/2014

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 55-year-old man who sustained a work-related injury on March 11, 2013. Subsequently, he developed chronic neck, back, and left hip pain. The patient continued to have chronic back pain despite epidural steroid injection on October 1, 2013. Based on a progress report dated on April 30, 2014, the patient reported persistent pain in his lower back, left groin, left hip, and down his left leg. His physical examination revealed painful straight leg maneuver on the left side, painful internal and external rotation of the left hip joint. There is antalgic gait pattern as well. He has 4/5 strength in the left anterior tibialis and peroneal and posterior tibialis. MRI of the left hip with contrast dated April 1, 2014 showed very severe osteoarthritis and chondromalacia. There is also tearing of the base of the superior labrum extending to the anterosuperior labrum. MRI of the lumbar spine showed that the patient has marked intervertebral degenerative changes at L5-S1. X-rays with AP pelvis and AP lateral left hip shows the patient has severe hip joint arthrosis on the left. There is bone on bone apposition at the superior dome of the femoral head with periacetabular cysts. A follow-up report dated May 1, 2014 states the pain is alleviated by taking pain medications. His physical examination demonstrated tenderness in the trapezius and right L4-5 region, tenderness in the left hip, positive left straight leg raise, positive Fabere and positive femoral stretch test. The patient was diagnosed with lumbar radiculopathy; lumbosacral disc protrusion, L4-5 and L5-S1; left hip strain/sprain and labrum tear. Prior treatment included physical therapy, lumbar epidural nerve Block, pain management, and pain medications. The provider requested authorization for Xartemis XR 7.5mg/325mg.

IMR ISSUES, DECISIONS AND RATIONALES

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

Xartemis XR 7.5mg/325mg Qty 60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 75, 78-80.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 75-81.

Decision rationale: Xartemis XR (oxycodone hydrochloride and acetaminophen) XR tablets combines 2 analgesics, oxycodone hydrochloride 7.5 mg and acetaminophen 325 mg. There is no documentation of a pain severity that justify the use of Xartemis, a medication that carries the same amount of Acetaminophen as Noroc used by the patient. (██████████) states he provided this medication to decrease the acetaminophen intake. The patient has been prescribed Norco 10/325 that has the same acetaminophen content as Xartemis and a change would not provide a decrease in acetaminophen consumption per day). Therefore, the request for Xartemis XR is not medically necessary.