

Case Number:	CM15-0003369		
Date Assigned:	01/14/2015	Date of Injury:	12/17/2012
Decision Date:	03/10/2015	UR Denial Date:	12/26/2014
Priority:	Standard	Application Received:	01/07/2015

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: Iowa, Illinois, Hawaii

Certification(s)/Specialty: Preventive Medicine, Occupational Medicine, Public Health & Gen Prev Med

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 injured worker is a 55 year old male, who sustained an industrial injury on 12/17/2012 when a bale of hay fell on his right shoulder. The diagnoses have included internal derangement of shoulder. Treatment to date has included arthroscopic rotator cuff repair and open distal clavicle resection with arthroscopic subacromial decompression on 10/21/20014 and postoperative physical therapy. Currently, the IW complains of numbness around his distal clavicle incision. There is some tenderness. He has been attending physical therapy. He has pain with passive motion. Pain is rated as a 6/10. Objective findings included well healed incisions. There is some decreased sensation lateral to his distal clavicle incision. He has a little tenderness to palpation over the distal clavicle incision. Range of motion is decreased but smooth. He has a little stiffness and was shown some stretching exercises. On 12/26/2014, Utilization Review modified a prescription for MS Contin #60 with 3 refills noting that the IW is in the intensive phase of shoulder rehabilitation. The MTUS was cited. On 1/07/2015, the injured worker submitted an application for IMR for review of refills of MS Contin #60.

IMR ISSUES, DECISIONS AND RATIONALES

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

MS Contin 15 mg #60 with 3 refills: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 74-96. Decision based on Non-MTUS Citation Shoulder (Acute & Chronic), Opioids

Decision rationale: MS Contin is a pure opioid agonist. ODG does not recommend the use of opioids for shoulder pain “except for short use for severe cases, not to exceed 2 weeks.” The patient has exceeded the 2 week recommended treatment length for opioid usage. MTUS does not discourage use of opioids past 2 weeks, but does state that “ongoing review and documentation of pain relief, functional status, appropriate medication use, and side effects. Pain assessment should include: current pain; the least reported pain over the period since last assessment; average pain; intensity of pain after taking the opioid; how long it takes for pain relief; and how long pain relief lasts. Satisfactory response to treatment may be indicated by the patient's decreased pain, increased level of function, or improved quality of life.” While the patient is 9 weeks post op from shoulder surgery, the treating physician does not fully document the least reported pain over the period since last assessment, intensity of pain after taking opioid, pain relief, increased level of function, or improved quality of life. As such the request for MS Contin 15 mg #60 with 3 refills is not medically necessary.