

Case Number:	CM15-0139019		
Date Assigned:	08/12/2015	Date of Injury:	06/14/2011
Decision Date:	09/09/2015	UR Denial Date:	07/15/2015
Priority:	Standard	Application Received:	07/17/2015

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: Massachusetts

Certification(s)/Specialty: Physical Medicine & Rehabilitation, 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 47 year old female sustained an industrial injury on 6-14-11. She subsequently reported neck, shoulder, low back and leg pain. Diagnoses include cervicalgia, cervical spondylosis without myelopathy, cervicocranial syndrome and degenerative lumbar-lumbosacral intervertebral disc disease. Treatments to date include x-ray and MRI testing, injections, chiropractic care, physical therapy and prescription pain medications. The injured worker continues to experience low back pain that radiates to the bilateral lower extremities. Upon examination of the cervical spine, there was tenderness noted. Cervical range of motion is reduced. The lumbar spine examination reveals paralumbar muscle spasms and reduced range of motion. A request for Nucynta ER 150mg #60, Nucynta IR 50mg #90 and Celebrex 200mg #60 was made by the treating physician.

IMR ISSUES, DECISIONS AND RATIONALES

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

Nucynta ER 150mg #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Therapeutic trial of opioids, Opioids for chronic pain.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines (1) Opioids, criteria for use, (2) Opioids, dosing Page(s): 76-80, 86.

Decision rationale: The claimant sustained a work-related injury in June 2011 and is being treated for neck, shoulder, low back, and leg pain. She was seen for an initial evaluation on 07/06/15. Medications, walking, stretching, and yoga were providing moderate relief of her symptoms. Previous medications had included OxyContin, Percocet, and Motrin which had worked well. Physical examination findings included a BMI of over 30. There was decreased cervical and lumbar range of motion with cervical trigger points and tenderness and lumbar muscle spasms. There was positive straight leg raising and a minimally antalgic gait. Nucynta and Nucynta ER were prescribed at a total MED (morphine equivalent dose) of over 160 mg per day and a trial of Celebrex was started. Guidelines recommend against opioid dosing is in excess of 120 mg oral morphine equivalents per day. In this case, the total MED being prescribed was more than that recommended. The claimant was not in acute distress. Although the claimant has chronic pain and the use of opioid medication may be appropriate, there are no unique features of this case that would support dosing at this level. Ongoing prescribing at this dose was not medically necessary.

Nucynta IR 50mg #90: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Therapeutic trial of opioids, Opioids for chronic pain.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines (1) Opioids, criteria for use, (2) Opioids, dosing Page(s): 76-80, 86.

Decision rationale: The claimant sustained a work-related injury in June 2011 and is being treated for neck, shoulder, low back, and leg pain. She was seen for an initial evaluation on 07/06/15. Medications, walking, stretching, and yoga were providing moderate relief of her symptoms. Previous medications had included OxyContin, Percocet, and Motrin which had worked well. Physical examination findings included a BMI of over 30. There was decreased cervical and lumbar range of motion with cervical trigger points and tenderness and lumbar muscle spasms. There was positive straight leg raising and a minimally antalgic gait. Nucynta and Nucynta ER were prescribed at a total MED (morphine equivalent dose) of over 160 mg per day and a trial of Celebrex was started. Guidelines recommend against opioid dosing is in excess of 120 mg oral morphine equivalents per day. In this case, the total MED being prescribed was more than that recommended. The claimant was not in acute distress. Although the claimant has chronic pain and the use of opioid medication may be appropriate, there are no unique features of this case that would support dosing at this level. Ongoing prescribing at this dose was not medically necessary.

Celebrex 200mg #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs (non-steroidal anti-inflammatory drugs).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs, specific drug list & adverse effects Page(s): 68-71.

Decision rationale: The claimant sustained a work-related injury in June 2011 and is being treated for neck, shoulder, low back, and leg pain. She was seen for an initial evaluation on 07/06/15. Medications, walking, stretching, and yoga were providing moderate relief of her symptoms. Previous medications had included OxyContin, Percocet, and Motrin which had worked well. Physical examination findings included a BMI of over 30. There was decreased cervical and lumbar range of motion with cervical trigger points and tenderness and lumbar muscle spasms. There was positive straight leg raising and a minimally antalgic gait. Nucynta and Nucynta ER were prescribed at a total MED (morphine equivalent dose) of over 160 mg per day and a trial of Celebrex was started. Guidelines recommend an assessment of GI symptoms and cardiovascular risk when NSAIDs are used. The claimant does not have identified risk factors for a GI event. The claimant is under age 65 and has no history of a peptic ulcer, bleeding, or perforation. There is no documented history of dyspepsia secondary to non-steroidal anti-inflammatory medication therapy and the claimant had previously taken Motrin without apparent adverse side effect and it had been effective. In this clinical scenario, guidelines do not recommend prescribing a selective COX-2 medication such as Celebrex (celecoxib) instead of a non-selective medication. As such, this request is not medically necessary.