

<b>Case Number:</b>	CM15-0167444		
<b>Date Assigned:</b>	09/08/2015	<b>Date of Injury:</b>	12/24/2008
<b>Decision Date:</b>	10/07/2015	<b>UR Denial Date:</b>	07/30/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/25/2015

### 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: California, Indiana, New York  
Certification(s)/Specialty: Internal Medicine

### 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 58 year old male, who sustained an industrial injury on 12-24-2008. The mechanism of injury was his boot got caught on a chair. The injured worker was diagnosed as having left knee pain post total replacement, right knee pain, right hand-wrist-shoulder pain and left foot infection. Radiology studies were not provided. Treatment to date has included surgery and medication management. A recent progress report dated 6-30-2015, reported the injured worker complained of left knee pain and difficulty sleeping. Physical examination revealed his left knee was in a brace and his left foot was in a walking boot and he had a wound vacuum attached. The physician is requesting Retrospective: Lunesta (eszopicione) 2mg, #30 (date of service: 06-30-2015).

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Retrospective: Lunesta (eszopicione) 2mg, #30 (DOS: 06/30/2015): Upheld**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Pain chapter.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain section, Lunesta.

**Decision rationale:** Pursuant to the Official Disability Guidelines, Eszopicolone (Lunesta) 2 mg #30 date of service June 30, 2015 is not medically necessary. Lunesta is not recommended for long-term use, but recommended for short-term use. The guidelines recommend limiting hypnotics to three weeks maximum in the first two months of injury only. Pain specialists rarely, if ever, recommend them for long-term use. They can be habit forming and may impair function and memory more than opiate pain relievers. See the guidelines for additional details. In this case, the injured worker's working diagnoses are left knee pain status post total knee replacement 2013; right knee pain secondary to overcompensation; compensatory right hand/wrist and right shoulder pain from use of a single crutch; compensatory right ankle/foot pain from increased weight bearing on the right side from the left knee injury. Date of injury is December 24, 2008. Request for authorization is July 7, 2015. According to a February 5, 2015 progress note, the treating provider prescribed Ambien and Xanax. According to an April 30, 2015 progress note, subjectively there are no sleep issues documented. Xanax and Ambien were discontinued and Lunesta 2 mg was prescribed. According to a June 30, 2015 progress note, the treating provider discusses Lunesta regarding sleep latency. Lunesta is not recommended for long-term use. The nest is recommended for short-term use. The guidelines recommend limiting hypnotics two to 2 to 3 weeks maximum in the first two months of injury only. The treating provider prescribed Lunesta April 30, 2015. Date of injury is December 24, 2008. Based on clinical information in the medical record, peer-reviewed evidence-based guidelines, poor documentation regarding sleep issues, Lunesta treatment continued for eight weeks with guideline recommendations indicating short-term use and guideline non recommendations limiting hypnotics two to 2 to 3 weeks maximum in the first two months of injury only, Eszopicolone (Lunesta) 2 mg #30 date of service June 30, 2015 is not medically necessary.