

Case Number:	CM15-0189086		
Date Assigned:	10/01/2015	Date of Injury:	03/07/2000
Decision Date:	11/09/2015	UR Denial Date:	09/11/2015
Priority:	Standard	Application Received:	09/25/2015

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: 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:

The injured worker is a male, who sustained an industrial injury on 3-7-2000. The injured worker is undergoing treatment for: low back and bilateral leg pain. On 8-27-15, he reported unchanged pain. He also reported he was unable to drive with and without medications because of cramping in the leg. He indicated he had stopped on his own taking Norco and Advil. He indicated that Norco made him feel "sedated and gave him gastrointestinal symptoms such as constipation". He wanted an alternative to Norco. He also indicated that he has difficulty with activities such as grocery shopping and cleaning house. He indicated Lyrica helps up to 50-60 percent with leg cramps and decreasing nerve pain. He rated his pain 5 out of 10 for the low back and 5 out of 10 for the bilateral lower extremity pain. Physical findings revealed tenderness in the low back, spasm in the low back and buttocks, positive straight leg raise bilaterally, and an antalgic gait. There is notation of an opiate contract being renewed. Norco was discontinued and Nucynta started. The records do not discuss 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. There is also no discussion regarding aberrant behaviors. The treatment and diagnostic testing to date has included: medications, magnetic resonance imaging of the lumbar spine (5-8-2001, 4-10-13, and 2-3-15), CT scan of the lumbar spine (1-21-2001), myelogram of the lumbar spine (1-18-2001), lumbar surgery (date unclear), ice, moist heat. Medications have included: Norco, Amitiza, and Lyrica. The records indicate he has been utilizing opioid medications since at least March 2015, possibly longer. Current work status: not working. The request for authorization is for: Nucynta 50mg quantity 90.

IMR ISSUES, DECISIONS AND RATIONALES

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

Nucynta 50mg quantity 90: Upheld

Claims Administrator guideline: Decision based on MTUS General Approaches 2004, Section(s): Initial Approaches to Treatment, and Chronic Pain Medical Treatment 2009.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Opioids, criteria for use, Opioids, dosing, Opioids, specific drug list. Decision based on Non-MTUS Citation ODG Workers Compensation Drug Formulary.

Decision rationale: The claimant has a remote history of a work injury occurring in March 2000 and continues to be treated for low back and bilateral lower extremity pain. He has a history of lumbar spine surgery in November 2000. In July 2015 Norco, Lyrica, and Amitiza were being prescribed. The medications were continued. When seen, pain was rated at 5/10 and was unchanged. He was having difficulty with activities of daily living. Physical examination findings included thoracic and lumbar facet tenderness. There were lumbar muscle spasms. Straight leg raising was positive. There was decreased lumbar spine range of motion. Norco was discontinued and Nucynta was prescribed. The total MED (morphine equivalent dose) was increased from 20 mg to approximately 60 mg per day. Guidelines indicate that when an injured worker has reached a permanent and stationary status or maximal medical improvement that does not mean that they are no longer entitled to future medical care. Nucynta is an immediate release short acting medication often used for intermittent or breakthrough pain. In this case, it was being prescribed when the claimant was having ongoing moderate pain. There were no identified issues of abuse or addiction and the total MED prescribed was less than 120 mg per day consistent with guideline recommendations. However, Nucynta is not a first line medication and there are other preferred alternative medications available. Prescribing was not medically necessary.