

Case Number:	CM15-0189819		
Date Assigned:	10/01/2015	Date of Injury:	06/21/2009
Decision Date:	11/13/2015	UR Denial Date:	08/27/2015
Priority:	Standard	Application Received:	09/26/2015

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

Certification(s)/Specialty: Physical Medicine & Rehabilitation

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 35 year old female, who sustained an industrial injury on 6-21-09. The injured worker is being treated for lumbar discogenic disease with nerve root compression. (MRI) magnetic resonance imaging of lumbar spine was performed on 8-31-15. Treatment to date has included oral medications including Motrin, Soma, Lyrica, Vicodin and Flexeril; lumbar epidural steroid injection (with minimal improvement), chiropractic treatments (with decreased pain noted) and activity modifications. On 7-13-15 she complained of increasing back pain and noted Soma and Lyrica were beneficial and 8-10-15, the injured worker reports she is not receiving her medication once again and Soma and Lyrica are helpful to keep her pain under reasonable control. She is currently not working. Physical exam performed on 7-13-15 and 8-10-15 revealed limited range of motion of lumbar spine and an antalgic gait. The treatment plan included addition of Venlafaxine 75mg and continuation of hydrocodone 10mg #15. On 8-27-15 a request for Venlafaxine 75mg #60 was non-certified by utilization review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Venlafaxine 75 mg #60: Overturned

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Medications for chronic pain, SNRIs (serotonin noradrenaline reuptake inhibitors).

Decision rationale: The 35 year old patient complains of lower back pain with radicular symptoms and myofascial pain, as per progress report dated 08/10/15. The request is for Venlafaxine 75 mg #60. There is no RFA for this case, and the patient's date of injury is 06/21/09. Diagnoses, as per progress 08/10/15, included lumbar discogenic disease at L4-5 and L5-S1 with nerve root compression with neurological loss at L4 and L5. Medication included Soma, Hydrocodone and Lyrica. The patient is disabled and is not working, as per the same report. MTUS chronic pain guidelines 2009, Selective serotonin and norepinephrine reuptake inhibitors (SNRIs) Section, pages 16-17 states: "Venlafaxine (Effexor): FDA-approved for anxiety, depression, panic disorder and social phobias, off-label use for fibromyalgia, neuropathic pain, and diabetic neuropathy." MTUS, Medications for chronic pain Section, pages 60 and 61 states that pain assessment and functional changes must also be noted when medications are used for chronic pain. In this case, Venlafaxine is first noted in progress report dated 08/10/15. The treater is prescribing the medication for the patient's neuropathic pain since her Lyrica, which was very beneficial, has been denied. In the same report, the treater states the patient needs a "membrane stabilizer to try to give her relief." Given the neuropathic pain, a trial of Venlafaxine appears reasonable and is medically necessary.