

Case Number:	CM15-0199313		
Date Assigned:	10/14/2015	Date of Injury:	05/15/2009
Decision Date:	11/23/2015	UR Denial Date:	10/02/2015
Priority:	Standard	Application Received:	10/09/2015

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: Arizona, California

Certification(s)/Specialty: Family Practice

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-work injury on 5-15-09. He reported initial complaints of back pain. The injured worker was diagnosed as having lumbosacral neuritis, lumbago, cervicgia, brachial neuritis, cervical spondylosis, and cervical disc displacement. Treatment to date has included medication, surgery (anterior fusion L4-5 on 2- 28-12 and neck fusion C5-6). Currently, the injured worker complains of pain rated 10 out of 10 without medication and 7 out of 10 with medication, status post neck surgery with increase in pain. Halcion is not effective for sleep. There is no aberrant drug behavior. Current medications include Hydrocodone 10 mg-acetaminophen 325 mg, Soma 350 mg, Halcion 0.25 mg, Dilaudid, Halcion, and Norco. Per the primary physician's progress report (PR-2) on 9-18-15, exam notes no acute distress, gait is non-antalgic, slightly decreased range of motion, tightness and spasm at the trapezius and paraspinals. Current plan of care includes reducing pain, improve current functional level, urine toxicology screening. The Request for Authorization requested service to include Pharmacy purchase of Halcion 0.25 mg Qty. 60 with 2 refills. The Utilization Review on 10-2-15 modified the request for Pharmacy purchase of Halcion 0.25 mg Qty. 15 to allow for weaning, per Official Disability Guidelines, Pain chapter.

IMR ISSUES, DECISIONS AND RATIONALES

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

Pharmacy purchase of Halcion 0.25 mg Qty 60 with 2 refills: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Benzodiazepines. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) pain chapter and pg 64.

Decision rationale: According to the Chronic Pain Medical Treatment Guidelines, Benzodiazepines are not recommended for long-term use because its efficacy is unproven and there is a risk of addiction. Most guidelines limit its use to 4 weeks and its range of action includes: sedation, anxiolytic, anticonvulsant and muscle relaxant. The MTUS guidelines do not comment on insomnia. According to the ODG guidelines, recommend that treatment be based on the etiology, with the medications. Pharmacological agents should only be used after careful evaluation of potential causes of sleep disturbance. Failure of sleep disturbance to resolve in a 7 to 10 day period may indicate a psychiatric and/or medical illness. Primary insomnia is generally addressed pharmacologically. Secondary insomnia may be treated with pharmacological and/or psychological measures. In this case, the claimant was on Sentra, Trazadone and Halcion for sleep. The etiology of sleep disturbance was not defined or further evaluated. Long-term use of Halcion for insomnia is not recommended. The Halcion with 2 refills is not medically necessary.