

Case Number:	CM15-0060126		
Date Assigned:	04/06/2015	Date of Injury:	10/12/2009
Decision Date:	05/06/2015	UR Denial Date:	03/17/2015
Priority:	Standard	Application Received:	03/30/2015

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, 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 38 year old male, who sustained an industrial injury on 10/12/2009. He reported a back injury while lifting heavy objects. The injured worker is currently diagnosed as having lumbar radiculopathy and low back pain. Treatment to date has included lumbar discectomy, lumbar spine MRI, cervical spine MRI, electromyography/nerve conduction studies, lumbar epidural steroid injection, and medications. In a progress note dated 02/24/2015, the injured worker presented with complaints of lower backache and bilateral lower extremity pain. The treating physician reported requesting authorization for Lyrica. The note identifies bilateral lower extremity pain and low back pain. Notes indicate that with the patient's medications, the pain is 7/10 and without the medication a patient's pain is 9/10. The patient's medications include Cymbalta, Lyrica, and Zanaflex, morphine, and Percocet. No medication side effects are reported. Physical examination revealed decreased sensation over the lateral aspect of the foot on both sides.

IMR ISSUES, DECISIONS AND RATIONALES

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

Lyrica 75mg, #90: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Specific Anti-Epilepsy Drugs: Pregabalin (Lyrica, no generic available).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines 8 C.C.R. 9792.20 - 9792.26 MTUS (Effective July 18, 2009) Page(s): 16-21 of 127.

Decision rationale: Regarding request for pregabalin (Lyrica), Chronic Pain Medical Treatment Guidelines state that antiepilepsy drugs are recommended for neuropathic pain. They go on to state that a good outcome is defined as 50% reduction in pain and a moderate response is defined as 30% reduction in pain. Guidelines go on to state that after initiation of treatment, there should be documentation of pain relief and improvement in function as well as documentation of side effects incurred with use. The continued use of AEDs depends on improved outcomes versus tolerability of adverse effects. Within the documentation available for review, there is a dedication of neurologic pain in the form of lumbar radiculopathy with associated reduction in sensation. However, there is no identification of any specific analgesic benefit from Lyrica (in terms of percent reduction in pain or reduction of NRS), and no documentation of specific objective functional improvement from Lyrica. Notes indicate that the patient has a slight pain reduction from the current regimen. However, that regimen includes numerous medications for neuropathic pain as well as 2 strong narcotics. It is unclear how much pain reduction is attributable to Lyrica specifically. Antiepileptic drugs should not be abruptly discontinued but unfortunately, there is no provision to modify the current request. As such, the currently requested pregabalin (Lyrica) is not medically necessary.