

Case Number:	CM15-0239991		
Date Assigned:	12/17/2015	Date of Injury:	09/29/1998
Decision Date:	01/21/2016	UR Denial Date:	11/20/2015
Priority:	Standard	Application Received:	12/08/2015

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: North Carolina
 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 an 81 year old male with an industrial injury date of 09-29-1998. Medical record review indicates he is being treated for low back pain, cervicalgia, post laminectomy syndrome, intervertebral disc degeneration of lumbosacral region. Subjective complaints (11-11-2015) included difficulty ambulating with numbness and tingling in bilateral feet. "Medications are working fair." The treating physician noted there were no major changes in the neck and low back pain. Average pain, mood and functional level since last visit are documented as 8 out of 10. Work status (11-11-2015) is listed as: "Patient is on disability." Current medications (11-11-2015) are documented as Abstral, Actonel, Cymbalta, Gavilax-Iron-Lactulose, Miralax, MS Contin (since at least 05-20-2015), Oxycodone, Prilosec and Ramipril. Failed medications are documented as Nucynta, Lidoderm patch, Celebrex, Flector patch, Subsys, Zorvolex and Lyrica. Prior treatment included medications and walker. Physical exam findings (11-11-2015) included alert and oriented with no signs of sedation or withdrawal. Sacroiliac joint pain was present. He walked with a walker. "There is no new deficit otherwise." The treating physician documented discussion of treatment agreement and the 4 A's of medication use. Urine drug screen done 09-14-2015 is documented as consistent. On 11-20-2015 the request for MS Contin 60 mg CR # 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:

MS Contin 60mg CR #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Opioids, dosing. Decision based on Non-MTUS Citation Official Disability Guidelines-Treatment in Workers' Compensation: Pain Chapter (updated 10/09/15) Opioids, Criteria for use, Opioids for chronic pain.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Opioids for chronic pain.

Decision rationale: When to Continue Opioids: (a) If the patient has returned to work; (b) If the patient has improved functioning and pain. (Washington, 2002) (Colorado, 2002) (Ontario, 2000) (VA/DoD, 2003) (Maddox-AAPM/APS, 1997) (Wisconsin, 2004) (Warfield, 2004) The long-term use of this medication class is not recommended per the California MTUS unless there documented evidence of benefit with measurable outcome measures and improvement in function. There is documented significant decrease in objective pain measures such as VAS scores for significant periods of time with pain decreased to a 8/10 from a 10/10. There are no objective measures of improvement of function or how the medication improves activities. Therefore all criteria for the ongoing use of opioids have not been met and the request is not medically necessary.