

Case Number:	CM14-0131560		
Date Assigned:	08/20/2014	Date of Injury:	04/17/2013
Decision Date:	09/24/2014	UR Denial Date:	08/04/2014
Priority:	Standard	Application Received:	08/18/2014

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. The expert reviewer is Board Certified in Preventive Medicine and is licensed to practice in Indiana. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This employee is a 44 year old male with date of injury of 4/17/2013. A review of the medical records indicates that the patient is undergoing treatment for cervicalgia, thoracic and lumbosacral radiculitis, and chronic pain syndrome. Subjective complaints include continued neck and lower back pain at a 6/10 level. Objective findings include cervical spine range of motion is restricted and pain upon palpation of paravertebral muscles; tenderness in para-lumbar muscles and positive straight leg raise test; sensation decreased over L5 S1 dermatomes; MRI shows disc protrusions with mild facet arthropathy at lower lumbar levels. Treatment has included cyclobenzaprine, gabapentin, Norco, Menthoderm, and epidural steroid injections. The utilization review dated 8/4/2014 non-certified Lunesta 1mg #60.

IMR ISSUES, DECISIONS AND RATIONALES

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

Lunestra 1mg #60 as an outpatient for neck and low back injury: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM - [https://www.acoempracguides.org/Cervical and Thoracic Spine](https://www.acoempracguides.org/Cervical%20and%20Thoracic%20Spine); Table 2, Summary of Recommendations, Cervical and Thoracic Spine Disorders ACOEM - [https://www.acoempracguides.org/Low Back](https://www.acoempracguides.org/Low%20Back); Table 2, Summary of Recommendations. Low Back Disorders.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Chronic Pain, insomnia, Mental Illness, Eszopicolone (Lunesta).

Decision rationale: The ODG states regarding Lunesta (Eszopicolone) it is not recommended for long-term use, but recommended for short-term use. Recommend limiting use of hypnotics to three weeks maximum in the first two months of injury only, and discourage use in the chronic phase. For insomnia ODG recommends that 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. (Lexi-Comp, 2008) Primary insomnia is generally addressed pharmacologically. Secondary insomnia may be treated with pharmacological and/or psychological measures. The specific component of insomnia should be addressed: (a) Sleep onset; (b) Sleep maintenance; (c) Sleep quality; & (d) Next-day functioning. Medical records do not indicate patient's sleep hygiene or the need for variance from the guidelines, such as a) Wake at the same time everyday; (b) Maintain a consistent bedtime; (c) Exercise regularly (not within 2 to 4 hours of bedtime); (d) Perform relaxing activities before bedtime; (e) Keep your bedroom quiet and cool; (f) Do not watch the clock; (g) Avoid caffeine and nicotine for at least six hours before bed; (h) Only drink in moderation; & (i) Avoid napping. Lunesta is not recommended as a first line or second line therapy for neck or back pain, and there is not documentation that the employee has insomnia. Therefore, Lunesta 1mg #60 is not medically necessary.