

Case Number:	CM14-0138067		
Date Assigned:	09/05/2014	Date of Injury:	05/05/1994
Decision Date:	10/06/2014	UR Denial Date:	08/20/2014
Priority:	Standard	Application Received:	08/26/2014

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 Neurology, has a subspecialty in Neuromuscular Medicine and is licensed to practice in New Jersey. 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:

The patient is a 63-year-old woman who sustained a work related injury on May 5, 1994. Subsequently, she developed chronic low back pain. According to a note dated on June 23, 2014 report, the patient was treated with spine surgery and physical therapy (L2-L3 posterior spinal fusion as well as an anterior spinal fusion; In 1997, she had her second spinal surgery, which was an L3-4 posterior spinal fusion with instrumentation). According to a fellow-up report dated August 1, 2014, the patient continued to have lower back pain on the left side, radiating down to the anterior aspect of the left knee and occasionally to the left toe. Her physical examination revealed decreased lumbar mobility with tenderness to palpation. The patient has generalized weakness in bilateral lower extremities. The patient is able to ambulate with a front wheeled walker, showing slow gait. A lumbar X-ray study dated July 16, 2014 showed post-surgical changes associated with the thoracolumbar spine that remained unchanged. There was no evidence to acute fracture per radiology report. The patient's diagnoses included chronic low back pain, degenerative lumbar disc disease, lumbar spinal stenosis, thoracolumbar radiculopathy, previous L2-L5 fusion with instrumentation, depression, and anxiety. The provider requested authorization for Duragesic patches.

IMR ISSUES, DECISIONS AND RATIONALES

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

Duragesic 25 mcg (fentanyl transderm system) CII Patch: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM, Chronic Pain Treatment Guidelines Opioids. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG)

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Duragesic (fentanyl transdermal system) Page(s): 68.

Decision rationale: According to MTUS guidelines, Duragesic (fentanyl transdermal system). Not recommended as a first-line therapy. Duragesic is the trade name of a fentanyl transdermal therapeutic system, which releases fentanyl, a potent opioid, slowly through the skin. It is manufactured by ALZA Corporation and marketed by Janssen Pharmaceutica (both subsidiaries of Johnson & Johnson). The FDA-approved product labeling states that Duragesic is indicated in the management of chronic pain in patients who require continuous opioid analgesia for pain that cannot be managed by other means. In this case, the patient continued to have pain despite the use of high dose of opioids. There is no documentation of continuous monitoring of adverse reactions and of patient's compliance with her medication. In addition, there is no documentation that the patient developed tolerance to opioids or need continuous around the clock opioid administration. Therefore, the request for Duragesic Patch 25mcg is not medically necessary.