

Case Number:	CM14-0143622		
Date Assigned:	09/12/2014	Date of Injury:	04/16/2003
Decision Date:	10/10/2014	UR Denial Date:	08/04/2014
Priority:	Standard	Application Received:	09/04/2014

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 Internal Medicine and is licensed to practice in California. 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 57-year-old female with date of injury on 04/16/2003. There is no report of mechanism of action but the patient had an injury to her lumbar spine and has had multiple lumbar surgical procedures since. She carries a diagnosis of post-laminectomy syndrome at this time. She also complains of left knee pain. Surgery has been done on the knee and prior to that, synvisc was tried without benefit. Current regimen for her chronic pain includes MS Contin, Fentanyl patches, and Neurontin. The current request is for MS Contin 60 MG/12 HRS Tablet ER #60 and for Fentanyl 75 MCG/Hr Film ER Transdermal; 1 Every Other Day #15.

IMR ISSUES, DECISIONS AND RATIONALES

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

MS Contin 60 MG/12 HRS Tablet ER; 1 Every 12 Hours by Mouth #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Special Topics.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines OPIOIDS Page(s): 74-96.

Decision rationale: MTUS guidelines state that long-acting opioids can be used in chronic pain. However, documentation as to failure of standard therapies and also documentation as to improvements in pain and/or function must be shown and hopefully, the use of the medications

can allow the patient to return to work. The data provided states this patient is not improving on her current regimen of two long acting opioids and states her pain is still 10/10 on the medications. Furthermore, a recent peer to peer with the treating physician stated that the medication regimen was not working and the plan was to taper the long acting opioids over time. As such, there is no supporting evidence in the notes provided to use the two long-acting opioids that the patient is on and as such, the MS Contin is not medically necessary.

Fentanyl 75 MCG/Hr Film ER Transdermal; 1 Every Other Day #15: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines OPIOIDS Page(s): 74-96.

Decision rationale: As per the MS Contin above, MTUS guidelines state that long-acting opioids can be used in chronic pain. However, documentation as to failure of standard therapies and also documentation as to improvements in pain and/or function must be shown and hopefully, the use of the medications can allow the patient to return to work. The data provided states this patient is not improving on her current regimen of two long acting opioids and actually a recent peer to peer with the treating physician stated that the medication regimen was not working and the plan was to taper the long acting opioids over time. As such, there is no supporting evidence in the notes provided to use the two long-acting opioids that the patient is on and as such, the Fentanyl is not medically necessary.