

Case Number:	CM14-0210055		
Date Assigned:	12/23/2014	Date of Injury:	12/29/1995
Decision Date:	02/13/2015	UR Denial Date:	12/02/2014
Priority:	Standard	Application Received:	12/15/2014

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 injured worker (IW) is a 45-year-old woman with a date of injury of December 29, 1995. The mechanism of injury is not documented in the medical record. The injured worker's working diagnosis is thoracic back pain. There is a single dictated and hand written progress note in the medical record dated November 24, 2014. The subjective section states the IW needs Butrans, Baclofen and Norco refilled. The IW has been using marijuana and alcohol to dull her pain instead of OxyContin 10 mg BID. The provider reports the IW She has been on extremely large amounts of narcotics in the past and has been weaned down significantly from higher doses. The provider reports he will continue to decrease her short acting Norco and then decreased the OxyContin. He is requesting that worker's compensation approved Butrans, which is a good medicine to wean down on. The Norco prescription is indicated for one tablet every eight hours as needed. Baclofen is 10 mg one tablet three times a day as needed. The medical records not contain documentation of the reduction or discontinuation of the injured worker's OxyContin. There has been no documentation regarding symptomatic or objective functional improvement following the addition of Butrans to the medication regimen. The current request is for Butrans 20mcg/hr. #4.

IMR ISSUES, DECISIONS AND RATIONALES

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

Pharmacy purchase of Butrans 20mcg/HR #4: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids, criteria for use.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opiates Page(s): 74-96. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG): Pain Section, Opiates/Butrans.

Decision rationale: Pursuant to the Chronic Pain Treatment Guidelines and the Official Disability Guidelines, Butrans 20mcg/hr #4 is not medically necessary. Ongoing, chronic opiate use requires ongoing review and documentation of pain relief, functional status, appropriate medication use and side effects. A detailed pain assessment should accompany ongoing opiate use. Satisfactory response to treatment may be indicated by the patient's decreased pain, increase level of function or improved quality of life. The lowest possible dose should be prescribed to improve pain and function. Butrans is recommended as an option for treatment of chronic pain in selected patients (not first-line for all patients). It is primarily classified as a partial mu-agonist and kappa antagonist. It blocks effects of subsequently administered opioid agonists. In this case, there is a single dictated and hand written progress note dated November 24, 2014. The subjective section states the injured worker "needs Butrans, baclofen and Norco refilled. The injured worker has been using marijuana and alcohol to dull her pain instead of OxyContin 10 mg BID. She has been on extremely large amounts of narcotics in the past and has been weaned down significantly from higher doses we will continue to decrease her short acting Norco and then decreased the OxyContin. I am requesting that workers compensation approved Butrans which is a good medicine to wean down on. The injured workers working diagnosis is thoracic back pain." The documentation is unclear as to whether or not OxyContin is being taken in conjunction with Norco and Butrans according to the subjective section in the progress note (Supra). The Norco prescription is indicated for one tablet every eight hours as needed. Baclofen is 10 mg one tablet three times a day as needed. The medical records not contain documentation of the reduction or discontinuation of the injured worker's OxyContin. There has been no documentation regarding symptomatic or objective functional improvement following the addition of Butrans to the medication regimen. Consequently, absent clinical documentation support the ongoing use of Butrans, the discontinuation or reduction in dose of OxyContin and evidence of objective functional improvement with Butrans, Butrans 20mcg/hr #4 is not medically necessary.