

Case Number:	CM15-0116574		
Date Assigned:	06/25/2015	Date of Injury:	01/14/2014
Decision Date:	07/23/2015	UR Denial Date:	05/13/2015
Priority:	Standard	Application Received:	06/17/2015

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: Massachusetts

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Pain Management

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 a 37 year old male, who sustained an industrial injury on 01/14/2014. The injured worker was noted to be working as a carpenter when he fell and from a second story onto concrete injuring his lumbar area. On provider visit dated 05/04/2015 the injured worker has reported chronic thoracolumbar pain. On examination of the lumbar spine revealed tenderness to palpation at paravertebral muscle, spinous tenderness was noted as well. Straight leg raise was positive on the left side. The diagnoses have included closed fracture of lumbar vertebra without spinal cord injury and lumbar radiculopathy. Treatment to date has included pain counseling, neurosurgery consultation, home exercise program and medication Norco and Gabapentin. The provider requested Nucynta and Hysingla.

IMR ISSUES, DECISIONS AND RATIONALES

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

Nucynta 75 mg Qty 60: Overturned

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines (1) Opioids, criteria for use, p76-80 (2) Opioids, dosing, p86.

Decision rationale: The claimant sustained a work-related injury in January 2014 when he fell from a roof and sustained an L1 burst fracture and continues to be treated for chronic low back pain. Medications are referenced as working well and facilitating activities of daily living and a home exercise program. When seen, pain was rated at 8/10. He was having gastrointestinal upset when taking Norco. There was lumbar spine tenderness with positive straight leg raising. The claimant's BMI was over 30. A trial of Nucynta was requested and Hysingla was prescribed. The total MED (morphine equivalent dose) was less than 90 mg. Nucynta is an immediate release short acting medication often used for intermittent or breakthrough pain. In this case, it was being prescribed as part of the claimant's ongoing management when Norco had caused side effects. There were no identified issues of abuse or addiction. The total MED was less than 120 mg per day consistent with guideline recommendations. Prescribing Nucynta was appropriate and medically necessary.

Hysingla 30 mg Qty 30: Overturned

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines (1) Opioids, criteria for use, p76-80 (2) Opioids, dosing, p86.

Decision rationale: The claimant sustained a work-related injury in January 2014 when he fell from a roof and sustained an L1 burst fracture and continues to be treated for chronic low back pain. Medications are referenced as working well and facilitating activities of daily living and a home exercise program. When seen, pain was rated at 8/10. He was having gastrointestinal upset when taking Norco. There was lumbar spine tenderness with positive straight leg raising. The claimant's BMI was over 30. A trial of Nucynta was requested and Hysingla was prescribed. The total MED (morphine equivalent dose) was less than 90 mg. Hysingla is a sustained release opioid used for treating baseline pain. In this case, it was being prescribed as part of the claimant's ongoing management. There were no identified issues of abuse or addiction. The total MED was less than 120 mg per day consistent with guideline recommendations and Norco which also contains Hydrocodone had provided improved activities of daily living and exercises tolerance but was causing side effects. Prescribing Hysingla was appropriate and medically necessary.