

Case Number:	CM15-0119497		
Date Assigned:	06/30/2015	Date of Injury:	07/30/1998
Decision Date:	07/29/2015	UR Denial Date:	06/18/2015
Priority:	Standard	Application Received:	06/22/2015

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: California, Indiana, New York
Certification(s)/Specialty: Internal Medicine

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 50 year old female, who sustained an industrial injury on 7/30/98. The injured worker has complaints of female. The documentation noted that the cervical spine range of motion is restricted with flexion limited to 30 degrees and extension is limited to 10 degrees due to pain. The paravertebral muscles, spasm and tenderness is noted on the right side. Left knee has tenderness to palpation over the medial joint line and there is moderate effusion in the right knee joint and left ankle has tenderness noted over the talofibular ligament and edema was present. The diagnoses have included cervical facet syndrome; disc disorder cervical; pain in joint of lower leg and chronic pain syndrome. Treatment to date has included norco; flector; morphine sulfate CR; ambien and nuvigil; carpal tunnel release and tenovagotomy for De Quervain; right shoulder arthroscopy; right ankle arthroscopy; right ankle reconstruction; left shoulder arthroscopy and right shoulder and right shoulder replacement. The request was for morphine sulfate Cr 15mg #270 (3 month supply) and flector 1.3% patch #90 (3 month supply).

IMR ISSUES, DECISIONS AND RATIONALES

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

Morphine Sulf Cr 15mg #270 (3 month supply): Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines opioids Page(s): 92-93.

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.

Decision rationale: Pursuant to the Chronic Pain Medical Treatment Guidelines and the Official Disability Guidelines, Morphine sulfate CR 15mg #270 (3 month supply) is not medically necessary. Ongoing, chronic opiate use requires an 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 patient's decreased pain, increased level of function or improve quality of life. The lowest possible dose should be prescribed to improve pain and function. Discontinuation of long-term opiates is recommended in patients with no overall improvement in function, continuing pain with evidence of intolerable adverse effects or a decrease in functioning. The guidelines state the treatment for neuropathic pain is often discouraged because of the concern about ineffectiveness. In this case, the injured worker's working diagnoses are cervical facet syndrome; disc disorder cervical; pain joint lower leg; chronic pain syndrome; pain in joint unspecified site; and pain in joint of shoulder. The date of injury is July 30, 1998 (17 years prior). The earliest progress note in the medical record is dated December 13, 2011. Current medications included Ambien, Flector patch, fentanyl patches, Norco 10/325 mg, Nuvigil. According to a progress note dated May 28, 2013, fentanyl patches were discontinued and morphine sulfate CR 15 mg started. The request for authorization is dated June 11, 2015. The most recent progress note in the medical record is dated April 9, 2015. The injured worker is on the same medications including morphine sulfate CR 15 mg. There are no subjective complaints noted in the April 9, 2015 progress note. Objectively, the injured worker ambulates with a limp. Cervical range of motion was decreased there is tenderness to palpation in the posterior paraspinal cervical muscle. There is no documentation demonstrating objective(s) improvement with ongoing morphine sulfate CR 15 mg. There are no risk assessments. There are no detailed pain assessments. Additionally, there is no contemporaneous documentation on or about the date of request for authorization June 11, 2015. Consequently, absent clinical documentation demonstrating objective functional improvement over a two-year period, risk assessments and detailed pain assessments dating back to December 2011 (the earliest progress note not the start date for opiate therapy) and attempted weaning, Morphine sulfate CR 15mg #270 (3 month supply) is not medically necessary.

Flector 1.3% patch #90 (3 month supply): Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Non-Steroidal Anti-Inflammatory Drugs (NSAIDs) Page(s): 67-68.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical analgesics Page(s): 111-113. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain section, Topical analgesics.

Decision rationale: Pursuant to the Chronic Pain Medical Treatment Guidelines and the Official Disability Guidelines, Flector patch 1.3% #90 (3 month supply) is not medically necessary. Topical analgesics are largely experimental with few controlled trials to determine efficacy and safety. They are primarily recommended for neuropathic pain when trials of antidepressants and anticonvulsants have failed. Any compounded product that contains at least one drug (or drug class) that is not recommended is not recommended. Flector patch is indicated for acute sprains, strains and contusions. In this case, the injured worker's working diagnoses are cervical facet syndrome; disc disorder cervical; pain joint lower leg; chronic pain syndrome; pain in joint unspecified site; and pain in joint of shoulder. The date of injury is July 30, 1998 (17 years prior). The earliest progress note in the medical record is dated December 13, 2011. Current medications included Ambien, Flector patch, fentanyl patches, Norco 10/325 mg, Nuvigil. According to a progress note dated May 28, 2013, fentanyl patches were discontinued and morphine sulfate CR 15 mg started. The request for authorization is dated June 11, 2015. The most recent progress note in the medical record is dated April 9, 2015. There are no contemporaneous progress notes on or about the date of request authorization. There are no subjective complaints noted in the April 9, 2015 progress note. Objectively, the injured worker ambulates with a limp. Cervical range of motion was decreased there is tenderness to palpation in the posterior paraspinal cervical muscle. Flector patches have been prescribed, as noted above, as far back as the earliest progress note dated December 13, 2011. The start date is unspecified according to the medical records available for review. Flector patch is indicated for acute sprains, strains and contusions. There is no documentation in the medical record of acute sprains, strains or contusions. There is no documentation of failed first-line treatment with antidepressants or into convulsions. There is no clinical rationale in the medical record for ongoing Flector patches. There is no documentation demonstrating objective functional improvement with ongoing Flector patches. Consequently, absent clinical documentation with objective functional improvement, failed first-line treatment, evidence of acute sprains, strains and contusions, Flector patch 1.3% #90 (3 month supply) is not medically necessary.