

Case Number:	CM15-0175395		
Date Assigned:	09/16/2015	Date of Injury:	07/18/2013
Decision Date:	10/20/2015	UR Denial Date:	08/27/2015
Priority:	Standard	Application Received:	09/04/2015

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: Arizona, California
 Certification(s)/Specialty: Family Practice

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 48-year-old male who sustained an industrial injury on July 18, 2013. Diagnoses have included lumbar radiculopathy, lumbar spinal degenerative disc disorder, low back pain, and he is status post right knee arthroscopy. Documented treatment includes medications including Duexis, Lidoderm patch, Vicodin, Skelaxin, Lidocaine ointment, Voltaren Gel, Lyrica, and Neurontin stated in August 17, 2015 progress report to have improved function and activities of daily living and enable him to work part time at full duty. During the June 18, 2015 visit, he reported that he does experience side effects of heartburn from NSAIDs, but when he takes Duexis, this is not present. Objective findings during August 5, 2015 examination stated there was muscular tenderness and guarding with right and left paracervical, trapezial and paralumbar areas, decreased cervical and lumbar spine motion, and palpable right and left knee patellofemoral crepitus. The injured worker continues to report constant pain in his neck radiating into the back of his head and worse with neck movement, mid and lower back pain worse with movement, and bilateral knee pain including cracking and popping which is worse with activity. He reports that his sleep is disturbed and that activities are impaired. The treating physician's plan of care includes Duexis 800-26.6 mg., which was denied August 27, 2015.

IMR ISSUES, DECISIONS AND RATIONALES

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

Duexis 800-26.6 mg # 90: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, and Chronic Pain.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): NSAIDs (non-steroidal anti-inflammatory drugs), NSAIDs, GI symptoms & cardiovascular risk.

Decision rationale: According to the guidelines, NSAIDs are recommended as a second-line treatment after acetaminophen. Acetaminophen may be considered for initial therapy for patients with mild to moderate pain. NSAIDs are recommended as an option for short-term symptomatic relief. In this case, the claimant had been on NSAIDs for over 6 months in combination with opioids. NSAIDs cause heartburn so the claimant needed Duexis, which has Ibuprofen and an H2 blocker. An H2 blocker is indicated for GERD. Similar to a PPI, it is to be used with for those with high risk of GI events such as bleeding, perforation, and concurrent anticoagulation/anti-platelet use. In this case, there is no documentation of GI events or antiplatelet use that would place the claimant at risk. Long-term use of Duexis in combination with multiple other analgesics is not recommended. Therefore, the continued use of Duexis is not medically necessary.