

Case Number:	CM15-0029419		
Date Assigned:	02/23/2015	Date of Injury:	08/26/2008
Decision Date:	09/10/2015	UR Denial Date:	01/20/2015
Priority:	Standard	Application Received:	02/17/2015

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: Pennsylvania
 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 49 year-old female who sustained an industrial injury on 08/26/08. Initial complaints and diagnoses are not available. Diagnostic testing and treatments to date have included MRI/CT of the right knee, right total knee revision, physical therapy, right knee injections, psychological evaluation, and pain medication management. In a progress note dated 01/13/15, the treating physician reports the injured worker broke the narcotic trust agreement; she agrees to begin weaning from Oxycontin. Current diagnoses include status post right total knee arthroplasty slowly improving; she has a history of substance abuse. Current plan of care and requests for treatment includes Suboxone prescribing detoxification program at the end of 3-month weaning, Oxycontin (2nd month) 10mg #60, Oxycontin (3rd month) 10mg #30, Norco 10/325mg #120 with 2 refills, and Soma 350mg #60 with 2 refills. The injured worker is under temporary total disability. Date of Utilization Review: 01/20/15.

IMR ISSUES, DECISIONS AND RATIONALES

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

Oxycontin (2nd month) 10mg #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids; Weaning of Medications.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Detoxification and Opioids Page(s): 42 and 79.

Decision rationale: This worker broke the Narcotic Trust Agreement with the prescribing physician. According to the record she was receiving additional narcotics from another physician which was in violation of the contract. She also has a history of substance abuse. She agreed to tapering off all of her narcotic medication. This is appropriate. According to the MTUS, "Gradual weaning is recommended for long-term opioid users because opioids cannot be abruptly discontinued without probable risk of withdrawal symptoms". (p 42) The MTUS also states, "It is suggested that a patient be given a 30-day supply of medications (to facilitate finding other treatment) or be started on a slow weaning schedule if a decision is made by the physician to terminate prescribing of opioids/controlled substances". In this case, the plan was for the patient to be referred to a detoxification program and placed on suboxone. While a 30 day prescription is appropriate, a prescription for another 30 days a month later is not medically necessary or appropriate without re-evaluation at that time. Particularly given the history of violation of the Narcotic Trust Agreement and the history of substance abuse, there should be ongoing supervision during the weaning process. Furthermore, the plan was for the patient to be referred to a detoxification program and be treated with suboxone where detoxification would be expected to be managed.

Oxycontin (3rd month) 10mg #30: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids; Weaning of Medications.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Detoxification and Opioids Page(s): 42 and 79.

Decision rationale: This worker broke the Narcotic Trust Agreement with the prescribing physician. According to the record she was receiving additional narcotics from another physician which was in violation of the contract. She also has a history of substance abuse. She agreed to tapering off all of her narcotic medication. This is appropriate. According to the MTUS, "Gradual weaning is recommended for long-term opioid users because opioids cannot be abruptly discontinued without probable risk of withdrawal symptoms". (p 42) The MTUS also states, "It is suggested that a patient be given a 30-day supply of medications (to facilitate finding other treatment) or be started on a slow weaning schedule if a decision is made by the physician to terminate prescribing of opioids/controlled substances". In this case, the plan was for the patient to be referred to a detoxification program and placed on suboxone. While a 30 day prescription is appropriate, a prescription for another 30 days 2 months later is not medically necessary or appropriate without re-evaluation at that time. Particularly given the history of violation of the Narcotic Trust Agreement and the history of substance abuse, there should be ongoing supervision during the weaning process. Furthermore, the plan was for the patient to be referred to a detoxification program and be treated with suboxone where detoxification would be expected to be managed.

Norco 10/325mg #120 with 2 refills: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids; Weaning of Medications. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Pain Chapter, Hydrocodone.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Detoxification and Opioids Page(s): 42 and 79.

Decision rationale: This worker broke the Narcotic Trust Agreement with the prescribing physician. According to the record she was receiving additional narcotics from another physician which was in violation of the contract. She also has a history of substance abuse. She agreed to tapering off all of her narcotic medication. This is appropriate. According to the MTUS, "Gradual weaning is recommended for long-term opioid users because opioids cannot be abruptly discontinued without probable risk of withdrawal symptoms". (p 42) The MTUS also states, "It is suggested that a patient be given a 30-day supply of medications (to facilitate finding other treatment) or be started on a slow weaning schedule if a decision is made by the physician to terminate prescribing of opioids/controlled substances". In this case, the plan was for the patient to be referred to a detoxification program and placed on suboxone. While a 30 day prescription is appropriate, refills are not medically necessary or appropriate as there should be re-evaluation prior to a refill. Particularly given the history of violation of the Narcotic Trust Agreement and the history of substance abuse, there should be ongoing supervision during the weaning process. Furthermore, the plan was for the patient to be referred to a detoxification program and be treated with suboxone where detoxification would be expected to be managed. In addition, Norco is a schedule II controlled substance and refills are not permitted.

Soma 350mg #60 with 2 refills: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Carisoprodol (Soma).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Carisoprodol and Muscle Relaxants Page(s): 29 and 63-66.

Decision rationale: Soma (carisoprodol) is a muscle relaxant. According to the MTUS, muscle relaxants for pain are recommended with caution as a second line option for short-term treatment of acute exacerbations in patients with chronic low back pain. Muscle relaxants may be effective in reducing pain and muscle tension, and increased mobility. However, in most low back pain cases, they show no benefit beyond NSAIDs for pain and overall improvement. Anti-spasmodics such as Soma are used to decrease muscle spasm in conditions such as low back pain whether spasm is present or not. Soma is not recommended for chronic use and specifically is not recommended for longer than 2-3 weeks. This worker's medical record indicates she has been taking this medication longer than a month. Furthermore, Soma has abuse potential and according to the MTUS is not recommended. This is a particularly important consideration in this worker who has a history of substance abuse. Given that this worker has already been on

Soma for greater than 2-3 weeks, a prescription for it at this point, particularly with refills, is not medically necessary or appropriate.