

Case Number:	CM13-0039983		
Date Assigned:	12/20/2013	Date of Injury:	07/04/2008
Decision Date:	05/30/2014	UR Denial Date:	09/23/2013
Priority:	Standard	Application Received:	10/07/2013

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 Neurology, has a subspecialty in Neuromuscular 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 patient is a 51-year-old male who sustained a work-related injury on July 4, 2008. Subsequently, he developed right upper extremity pain, numbness, and tingling. He later underwent right carpal tunnel release. According to the note dated September 11, 2013, the patient was complaining of knee pain. At that point, he was using a walker. The patient was treated with Tramadol and Ultracet.

IMR ISSUES, DECISIONS AND RATIONALES

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

60 NORCO 5/325MG: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 78.

Decision rationale: According to the MTUS guidelines, Norco (Hydrocodone/Acetaminophen) is a synthetic opioid indicated for the pain management, but not recommended as a first line oral analgesic. In addition, according to the MTUS guidelines, ongoing use of opioids should follow specific rules: Final Determination Letter for IMR Case Number CM13-0039983 3 (1) All prescriptions should come from a single practitioner, a single pharmacy, and should be taken as

directed; (2) The lowest possible dose that improves pain and function should be prescribed; and (3) There should be ongoing review and documentation of pain relief, functional status, appropriate medication usage, and any side effects. Pain assessment should include current pain, the least reported pain since the last assessment, average pain, intensity of pain after taking the opioid, how long it takes for pain relief, and how long pain relief lasts. Four domains have been proposed as most relevant with regard to ongoing monitoring of opioid usage in the case of chronic pain: pain relief, side effects, physical and psychosocial functioning, and any potentially aberrant or non-adherent drug-related behaviors. The monitoring of these outcomes over time should affect the treating physician's therapeutic decisions. A satisfactory response can be indicated by decreased pain, increased level of function, or improved quality of life. There is no clear evidence of objective and recent functional and pain improvement with previous use of opioids (Tramadol). There is also no clear documentation of the efficacy/safety of using this medication. There is no clear justification for the need to continue the use of Norco. As such, the request is not medically necessary.

120 ULTRACET 27.5/325MG: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 113.

Decision rationale: According to the MTUS guidelines, Ultracet (Tramadol) is a central acting analgesic that may be used in chronic pain. Ultracet is a synthetic opioid that affects the central nervous system. It is not classified as a controlled substance by the DEA, but it is not recommended as a first-line oral analgesic. It is not clear from the patient's chart whether or not first-line pain medications were previously attempted. In addition, there is no documentation about the efficacy and adverse reaction profile of Ultracet. Therefore, the request is not medically necessary.