

<b>Case Number:</b>	CM13-0043679		
<b>Date Assigned:</b>	12/27/2013	<b>Date of Injury:</b>	02/04/2008
<b>Decision Date:</b>	05/27/2014	<b>UR Denial Date:</b>	10/18/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/25/2013

### 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 Physicla Medicine and Rehabilitation, has a subspecialty in Pain Management, and is licensed to practice in New York and Texas. 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 applicant is a 45-year-old and a represented [REDACTED], employee with a reported date of injury of February 4, 2008. Applicant was reported to have a diagnosis of thoracic or lumbosacral neuritis, and open pelvic fracture. In the most recent clinical notes available dated September 10, 2013 by [REDACTED], it was noted that the applicant's chief complaint at that time was low back pain, hip pain, and lower extremities pain. [REDACTED] noted that applicant took two to three tablets of Norco per day and ibuprofen two per day. He also noted that applicant had worsening pain with activity at night. The applicant was taking his medications as prescribed and that they were working well with no side effects reported. Current medications were listed as Norco 10/325, flexeril 10mg, and ibuprofen 600mg. Physical examination noted that applicant was well developed, well nourished, and in no distress. Gait was normal sitting and standing postures were normal, and there were normal transitions from sit to stand. Weight was 220 pounds. Urine toxicology screen was performed. There was a urine toxicology report provided dated September 12, 2013 which was inconsistent with the reported medication list in that there was no hydrocodone detected. The treating physician noted that the applicant had not been taking his medications the last two to three days because he needed to drive long distances and that was reasonable. In a utilization review letter of October 19, 2013, a prospective request for hydrocodone-ibuprofen 10-200 mg with 3 refills was modified to a certification of 1 prescription of hydrocodone-ibuprofen (10-200mg) up to #72 between October 11 and December 15, 2013. It is noted that per a October 11, 2013 evaluation by [REDACTED] [REDACTED] (which was not provided for review at this time), the applicant had been using opioid medications for several years, specifically Norco. However, due to development of elevated

liver enzymes, the Norco was discontinued on October 11, 2013 and hydrocodone-ibuprofen was started.

### **IMR ISSUES, DECISIONS AND RATIONALES**

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

#### **HYDROCODONE-IBUPROFEN 10/200MG WITH THREE REFILLS: Upheld**

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Section, Criteria For Use Page(s): 74-81.

**Decision rationale:** In the most recent clinical note available for review dated September 10, 2013, the treating provider noted that applicant was utilizing Norco for pain. It was reported in a clinical note of October 11, 2013 (that was not available for review), the claimant had been switched from Norco to hydrocodone-ibuprofen on October 11, 2013 due to the fact that applicant had been found to have elevated liver enzymes. While it was noted in a clinical note of October 11, 2013 that the applicant had been using opioids for several years and they have allowed him to cope with his pain and allow for increased function, there are no recent clinical notes documenting the reason for continued use of opioids. As per evidence based guidelines, opioids are generally not recommended for long term use. There was also no documentation regarding pain scores and the specific functional improvements that have resulted from use of this medication. The physical exam was noted to be normal. The urine toxicology screen of September 12, 2013 was noted to be inconsistent, as it was negative for hydrocodone, however the treating provider noted that applicant stated he had not taken the medication for 2-3 days due to having to drive long distances.