

Case Number:	CM13-0044980		
Date Assigned:	12/27/2013	Date of Injury:	03/01/2012
Decision Date:	02/14/2014	UR Denial Date:	10/10/2013
Priority:	Standard	Application Received:	10/29/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Internal Medicine, and is licensed to practice in New York. 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 physician 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 43 year old male with an h/o injury 3/1/12. His diagnoses include lumbosacral disc disease, HTN and increased cholesterol. The patient c/o chronic incapacitating lower back pain with bilateral thigh and leg pain. On a 5/13 M.D. visits the patient c/o 10/10 pain. A request for Norco was denied 10/10/13. An appeal was placed.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco 10/325 mg: 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 Page(s): 80-81.

Decision rationale: Per MTUS guidelines, opioid use for chronic back pain appears to be efficacious but limited for short-term pain relief, and long term efficacy is unclear (>16 weeks), but also appears limited. It states that opioids may be continued if the pt. has returned to work or has improved functioning and pain. Annals (2007) reported that there is no evidence that opioids showed long term benefit or improvement in function when used as treatment for chronic back pain. The patient has been on Norco since at least 4/12. A note then stated that the patient has

poor pain control with minimum response to Norco. Based on the above, the medicine remains non-certified.