

Case Number:	CM13-0050528		
Date Assigned:	01/15/2014	Date of Injury:	08/03/2011
Decision Date:	07/15/2014	UR Denial Date:	11/06/2013
Priority:	Standard	Application Received:	11/13/2013

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 Physical Medicine and Rehabilitation, has a subspecialty in Pain Management 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:

This is a patient with a date of injury of 08/03/11. A utilization review determination dated 11/06/13, recommends non-certification of acupuncture. The urine analysis was certified and the Norco was modified from #40 to #28. It was noted that a trial of acupuncture was utilized earlier in the year. A 10/23/13 medical report identifies 70% pain relief, functional gain, and activities of daily living (ADL) improvement from a recent epidural steroid injection (ESI). The low back pain has subsided, but he still complains of intermittent lower extremity pain. He takes two (2) tablets of Norco per day. On exam, he is tender over the paraspinal muscles (PSM) from L4-5 and L5-S1 on the left. There is limited lumbar active range of motion (AROM) and tenderness over left buttock. There is decreased sensation at L5 and S1 and an antalgic gait. Acupuncture was requested, as it has benefitted him in the past. "Request urine analysis performed on 04/24/13 and 09/18/13." A 09/18/13 medical report identifies that the patient's Norco bottle was stolen that morning when a "40-year-old lady knocked on his door asking to use his bathroom and when she left he noticed his prescription bottle and phone was missing." He filed a police report.

IMR ISSUES, DECISIONS AND RATIONALES

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

EIGHT (8) ACUPUNCTURE SESSIONS: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: The Acupuncture Medical Treatment Guidelines support the use of acupuncture for chronic pain, with additional use supported when there is functional improvement documented, which is defined as "either a clinically significant improvement in activities of daily living or a reduction in work restrictions... and a reduction in the dependency on continued medical treatment." A trial of up to six (6) sessions is recommended, with up to twenty-four (24) total sessions supported when there is ongoing evidence of functional improvement. Within the documentation available for review, there is documentation of previous acupuncture with unspecified benefit, but no indication of functional improvement as defined above by the guidelines. In the absence of such documentation, the currently requested additional acupuncture is not medically necessary.

ONE (1) PRESCRIPTION OF NORCO 10/325MG #40: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 76-79.

Decision rationale: The Chronic Pain Guidelines indicate that Norco is an opiate pain medication. Due to high abuse potential, close follow-up is recommended with documentation of analgesic effect, objective functional improvement, side effects, and discussion regarding any aberrant use. The guidelines go on to recommend discontinuing opioids if there is no documentation of improved function and pain. Within the documentation available for review, the patient is utilizing a relatively low dose, and has apparently been compliant with treatment. No intolerable side effects are noted. However, there is no clear indication that the Norco is improving the patient's function or pain (in terms of specific examples of functional improvement and percent reduction in pain or reduced NRS). As such, ongoing use of the medication is not appropriate. Opioids should not be abruptly discontinued; however, unfortunately, there is no provision to modify the current request to allow tapering. In light of the above issues, the currently requested Norco is not medically necessary.