

<b>Case Number:</b>	CM13-0056172		
<b>Date Assigned:</b>	12/30/2013	<b>Date of Injury:</b>	11/03/2008
<b>Decision Date:</b>	03/24/2014	<b>UR Denial Date:</b>	11/11/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/22/2013

### 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 Occupational 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 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 applicant has filed a claim for knee and leg pain reportedly associated with an industrial injury of July 20, 2002. Thus far, the applicant has been treated with the following: Analgesic medications, including long- and short-acting opioids; proton pump inhibitors; prior right knee meniscectomy surgery in 2005 with subsequent development of posttraumatic arthritis; and extensive periods of time off work. In a utilization review report of November 15, 2013, the claims administrator partially certified a request for 210 tablets of Norco with one (1) refill as 75 tablets of Norco 10/325, seemingly for weaning purposes. An earlier medical-legal report of March 7, 2007, is notable for comments that the applicant has not worked in several years. In a December 20, 2013, progress note, the applicant is reportedly unchanged. He takes anywhere from three to seven (3-7) Norco tablets a day. The applicant apparently has been asked to consider a total knee arthroplasty. The applicant is on Avinza, Nexium, and Norco. He reports poor sleep, back pain, joint pain, and muscle pain. He has been smoking a pack a day, it is further noted. The applicant has comorbid diabetes, it is further noted. Limited knee range of motion and strength are noted, in the 4/5 range. Avinza and Norco are renewed. It is stated that the applicant's pain scores are reduced from 8/10 to 2/10 with Norco and that he is able to go shopping with his wife and attend the gym twice a week with his current medication regimen. It is stated that usage of these medications facilitates the applicant's performing home exercises at the gym, although it does not appear that he has returned to work. In a November 18, 2013, knee surgery consultation, it is suggested that the applicant obtain a total knee arthroplasty.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Pain management treatment:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG-TWC Pain Procedure Summary (last updated 10/14/2013)

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids, criteria for use, On-going management Page(s): 80.

**Decision rationale:** The Chronic Pain Guidelines indicate that the cardinal criteria for the continuation of opioid therapy are evidence of successful return to work, improved functioning, and/or reduced pain affected as a result of ongoing opioid usage. In this case, two of the three aforementioned criteria have been met. While the applicant has not returned to work, he is reportedly performing home exercises on a daily basis, which he states are, in part, the results of ongoing opioid usage. The applicant also states that his ability to perform non-work activities of daily living, such as shopping and attending the gym are heightened as a result of ongoing opioid usage. The applicant is also reporting appropriate analgesia with pain scores reduced from 8/10 to 2/10, as a result of ongoing Norco usage. The request is certified, on independent medical review.