

<b>Case Number:</b>	CM14-0008624		
<b>Date Assigned:</b>	02/12/2014	<b>Date of Injury:</b>	11/20/2006
<b>Decision Date:</b>	09/03/2014	<b>UR Denial Date:</b>	01/06/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/22/2014

### 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 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 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 represented [REDACTED] employee who has filed a claim for chronic thoracic and low back pain reportedly associated with an industrial injury of November 20, 2006. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representations; opioid therapy; muscle relaxants; unspecified amounts of physical therapy; psychological counseling; psychotropic medications; and extensive periods of time off of work. In a Utilization Review Report dated January 6, 2014, the claims administrator failed to approve a request for Norco and Fexmid. The applicant's attorney subsequently appealed. In a December 12, 2013 progress note, the applicant reported 10/10 low back pain radiating to the left leg. The note was sparse, handwritten, and difficult to follow. The applicant was using Norco, Fexmid, and Axid, it was suggested. A lumbar diskogram was sought. The applicant was not working, it was acknowledged. Multiple medications were refilled. There was no mention of how or if the medication in question had benefited the applicant. In a mental health progress note of December 9, 2013, the applicant was described as off of work from a mental health perspective. The applicant remained depressed, anxious, and guarded. The applicant had a global assessment of function (GAF) of 50 with resultant 30% whole person impairment rating.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**NORCO 2.5/325 MG X 60:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines When to Continue Opioids topic Page(s): 80.

**Decision rationale:** As noted on page 80 of the MTUS Chronic Pain Medical Treatment Guidelines, the cardinal criteria for continuation of opioid therapy include evidence of successful return to work, improved functioning, and/or reduced pain achieved as a result of the same. In this case, however, the applicant is off of work. The applicant pain complaints appeared to be heightened and were described in the 10/10 range as recently as December 12, 2013, despite ongoing usage of Norco. The attending provider has not outlined any concrete improvements in pain or function achieved as a result of ongoing Norco usage. Therefore, the request is not medically necessary and appropriate.

**FEXMID 7.5 MG X 60:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Cyclobenzaprine topic Page(s): 41.

**Decision rationale:** As noted on page 41 of the MTUS Chronic Pain Medical Treatment Guidelines, addition of Cyclobenzaprine or Flexeril to other agents is not recommended. In this case, the applicant is, in fact, using a variety of other agents, including opioids such as Norco. Adding cyclobenzaprine or Flexeril to the mix is not indicated. Therefore, the request is not medically necessary and appropriate.