

<b>Case Number:</b>	CM14-0152141		
<b>Date Assigned:</b>	09/19/2014	<b>Date of Injury:</b>	09/23/2013
<b>Decision Date:</b>	11/14/2014	<b>UR Denial Date:</b>	09/03/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/18/2014

### 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, has a subspecialty in Preventive 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 pain syndrome reportedly associated with an industrial injury of September 23, 2013. Thus far, the applicant has been treated with the following: Analgesic medications; opioid therapy; transfer of care to and from various providers in various specialties; psychological counseling; earlier knee surgery; and unspecified amounts of physical therapy over the course of the claim. In a Utilization Review Report dated September 3, 2014, the claims administrator failed to approve request for Norco. The applicant's attorney subsequently appealed. In an August 13, 2014 progress note, the applicant reported ongoing complaints of left shoulder, left knee, and right hip pain. The applicant was described as using Norco, Relafen and Neurontin. The attending provider posited that the applicant's ongoing usage of Norco was ameliorating his ability to water the lawn, cook, and stow away groceries. The applicant's pain level has dropped from 10/10 without medications to 5/10 with medications, it was suggested. The applicant's work status was not clearly stated on this occasion. In a July 15, 2014 progress note, the applicant was given prescriptions for Neurontin, Norco, and Relafen. A 4 to 7/10 knee pain was noted. The applicant was asked to continue cognitive behavioral therapy. The attending provider again posited that Norco was allowing him to put away his groceries and cook. Once again, it was not clearly stated whether the applicant was working or not. The applicant was given restrictions, which were not seemingly being accommodated. In a June 5, 2014 medical-legal evaluation, the medical-legal evaluator opined that the applicant was total temporary disabled.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Norco 10/325mg 1 tab PO q 4-6 hours #150:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 91.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines When to Continue Opioids 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, on total temporary disability. The attending provider has seemingly reportedly some diminution in pain scores with ongoing Norco usage, the attending provider has failed to outline any meaningful improvements in function achieved as a result of the same. The applicant's comments to the effect that he is able to water his lawn and/or put away his groceries with medications does not seemingly constitute meaningful improvement achieved as a result of ongoing usage of Norco. Therefore, the request is not medically necessary.