

<b>Case Number:</b>	CM14-0166476		
<b>Date Assigned:</b>	10/13/2014	<b>Date of Injury:</b>	02/11/1999
<b>Decision Date:</b>	11/17/2014	<b>UR Denial Date:</b>	10/06/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/09/2014

### 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 mid and low back pain reportedly associated with an industrial injury of February 11, 1999. Thus far, the applicant has been treated with the following: Analgesic medications; transfer of care to and from various providers in various specialties; epidural steroid injection therapy; facet injections; medial branch blocks; and long- and short-acting opioids. In a Utilization Review Report dated October 6, 2014, the claims administrator denied a request for OxyContin and partially approved a request for oxycodone, apparently for weaning purposes. In an April 7, 2014 progress note, the applicant was reportedly ongoing complaints of neck and low back pain. The applicant was pending epidural steroid injection therapy. The applicant had temporarily stopped using Coumadin. The applicant was on Norco and OxyContin for pain relief. The applicant's work status was not furnished. The applicant was obese, it was incidentally noted. There was no explicit discussion of medication efficacy. In a later note dated April 24, 2014, the applicant was again described as using Norco and OxyContin for pain relief. The applicant was described as "retired" from work, at age 60. Multiple medications were refilled. It was stated that the applicant was able to perform light household chores with the medications, which were reportedly reducing his pain complaints by 30% to 50%. On July 17, 2014, the applicant reported 6-10/10 pain complaints. The applicant did have ongoing issues with depression and anxiety. The applicant stated that oxycodone and OxyContin were providing appropriate pain relief. The applicant's medication list included OxyContin, Coumadin, and oxycodone. The applicant again stated that the medications were reducing his pain by 30% to 50%. The applicant stated that he was able to perform light household chores with medications. In a note dated June 19, 2014, the applicant reported 7/10 pain with usage of pain medications. It was again stated that the applicant's pain scores were reduced by 30% to 50% with medications. The applicant was using

anywhere from two to six tablets of oxycodone daily. The applicant stated that he was able to perform light household chores with medications. Various interventional spine procedures were sought.

### **IMR ISSUES, DECISIONS AND RATIONALES**

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

#### **1 prescription of Oxycontin 80mg #90: 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, although it is acknowledged that this may be a function of age (60) as opposed to a function of the industrial injury. While the attending provider continues to report 30% to 50% reduction in pain scores of the applicant with ongoing medication usage, these comments are unchanged from visit to visit and are, furthermore, belied by somewhat incongruous comments in the same progress note that the applicant's pain scores are rated at 6-10/10 at times and 7/10, at times, despite ongoing medication consumption. It is further noted that the attending provider has failed to outline any meaningful, tangible improvements in function achieved as a result of ongoing OxyContin usage. The applicant's commentary to the fact that he is able to perform unspecified light household chores, in and of itself, does not constitute evidence of meaningful improvement in function achieved as a result of ongoing OxyContin usage. Therefore, the request is not medically necessary.

#### **1 prescription of Oxycodone 30mg #120: 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 attending provider has failed to outline any meaningful improvements in function achieved as a result of ongoing opioid usage. The applicant's commentary to the fact that he is able to perform light household chores with medications does not, in and of itself, constitute significant improvement with ongoing oxycodone usage. The attending provider's comment to the fact that the applicant is achieving

30% to 50% pain relief with medications is belied by commentary in other progress notes to the fact that the applicant continues to report pain scores as high as 7/10 with medications. Therefore, the request is not medically necessary.