

Case Number:	CM14-0169573		
Date Assigned:	10/17/2014	Date of Injury:	03/14/2013
Decision Date:	11/19/2014	UR Denial Date:	09/23/2014
Priority:	Standard	Application Received:	10/14/2014

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 Physical Medicine and Rehabilitation, has a subspecialty in Pain 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:

This is a patient of the date of injury of March 14, 2013. A utilization review determination dated September 23, 2014 recommends modified certification of Norco. Norco with 2 refills was requested and Norco with no refills was recommended for certification. Modified certification was recommended due to lack of documentation of objective gains in function or change in pain scores as a result of the use of this medication. A progress report dated September 12, 2014 identifies subjective complaints of headache and neck pain. The pain has been so severe that the patient has been taking increasing amounts of pain medication and contemplating going to the emergency room. The patient has been unable to return to work because of continuing pain. The patient is currently using Norco and clonazepam. Physical examination reveals tenderness to palpation around the occipital nerves with positive facet loading. The neurologic examination is normal. Diagnoses include cervical myofascial pain, cervical spine dysfunction, nerve injury, and nerve entrapment. The treatment plan recommends continuing clonazepam as the insurance has denied further follow-ups with a psychologist. Additionally, a prescription for Norco is provided with 3 tablets per day due to the exacerbation of pain.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco 10/325 mg, QTY: 90 with 2 refills: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids, Criteria for Use Page(s): 78-80, 124.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 44, 47, 75-79, 120 of 127.

Decision rationale: Regarding the request for Norco (hydrocodone/acetaminophen), California Pain Medical Treatment Guidelines state 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. Guidelines go on to recommend discontinuing opioids if there is no documentation of improved function and pain. Within the documentation available for review, there is no indication that the medication is improving the patient's function or pain (in terms of specific examples of functional improvement and percent reduction in pain or reduced NRS), no documentation regarding side effects, and no discussion regarding aberrant use (although there is statement indicating that the patient took "more" medication recently). As such, there is no clear indication for ongoing use of the medication. Opioids should not be abruptly discontinued, but unfortunately, there is no provision to modify the current request to allow tapering. In light of the above issues, the currently requested Norco (hydrocodone/acetaminophen) is not medically necessary.