

Case Number:	CM14-0184122		
Date Assigned:	11/12/2014	Date of Injury:	06/05/2014
Decision Date:	12/19/2014	UR Denial Date:	10/13/2014
Priority:	Standard	Application Received:	11/05/2014

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 low back reportedly associated with an industrial injury of June 5, 2014. Thus far, the applicant was treated with the following: Analgesic medications; unspecified amounts of physical therapy; chiropractic manipulative therapy; acupuncture; and reported return to restricted duty work. In a Utilization Review Report dated October 13, 2014, the claims administrator denied a request for Norco. ODG Guidelines were invoked in the report rationale. The claims administrator stated that the attending provider had failed to document improvement with medication therapy. In an August 27, 2014 progress note, the applicant reported ongoing complaints of low back pain. The applicant completed six sessions of physical therapy. The applicant was using baclofen, metformin, and Norco, it was noted. The applicant was currently working as a busboy at a restaurant. The applicant exhibited a normal gait. MRI imaging of the lumbar spine, Norco, Naprosyn, Zanaflex, and Medrol Dosepak were endorsed. A 20-pound lifting limitation was issued. The applicant reported 7/10 pain without medications versus 5/10 with medications. On October 8, 2014, the attending provider noted that the applicant reported 8/10 without medications versus 5/10 with medications. The applicant had a history of earlier lumbar discectomy in 2005. The applicant was asked to continue current medications, including Naprosyn and Zanaflex. A 20-pound lifting limitation was endorsed. It did appear that the applicant was working with said limitation in place.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco10/325mg, one tab PO BID to TID, quantity and number of refills unspecified, for the symptoms related to the lumbar spine: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Weaning of Medications Page(s): 124.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 3 Initial Approaches to Treatment, Chapter 12 Low Back Complaints Page(s): 47; Table 12-8, page 308.

Decision rationale: As noted in the MTUS-adopted ACOEM Guidelines in Chapter 12, Table 12-8, page 308, a short course of opioids is deemed "optional" in the evaluation and management of acute and subacute low back pain complaints as were present here on or around the date in question. The MTUS guideline in ACOEM Chapter 3, page 47, further notes that an attending provider should incorporate some discussion of "efficacy of medication" into his choice of recommendations. The attending provider has reported on several occasions, referenced above that the applicant's pain scores are reduced from 8/10 to 5/10 with medications and that ongoing usage of Norco has facilitated the applicant's returning to and maintaining successful return-to-work status as a restaurant server. Continuing the same, on balance, was therefore indicated. Accordingly, the request is medically necessary.