

<b>Case Number:</b>	CM14-0186264		
<b>Date Assigned:</b>	11/14/2014	<b>Date of Injury:</b>	05/06/2011
<b>Decision Date:</b>	12/31/2014	<b>UR Denial Date:</b>	10/10/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/07/2014

### 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 neck pain reportedly associated with an industrial injury of May 6, 2011. Thus far, the applicant has been treated with the following: Analgesic medications; transfer of care to and from various providers in various specialties; opioid therapy; a knee brace; and unspecified amounts of physical therapy over the course of the claim. In a Utilization Review Report dated October 10, 2014, the claims administrator failed to approve a request for Norco, citing a lack of benefit with the same. The claims administrator stated that it had agreed upon a weaning or tapering schedule with the applicant's treating provider. In an April 15, 2013 progress note, the applicant received a viscosupplementation injection for knee arthritis. In a progress note dated February 11, 2013, the applicant reported ongoing complaints of neck, low back, knee, and shoulder pain. It was suggested that the applicant was working and had responded favorably to the earlier viscosupplementation injection. It was stated that the applicant did have some constraints in terms of certain activities such as playing sports, running, and playing football. In a June 5, 2014 progress note, the applicant reported ongoing complaints of low back and knee pain. It was stated that the applicant was now using four tablets of Norco daily. The treating provider suggested that the applicant continue weaning off of opioids. The applicant's work status was not clearly furnished on this occasion. In a July 9, 2014 applicant questionnaire, the applicant acknowledged that he was still using Norco as of that point in time. The applicant's work status was not furnished. In a September 3, 2014 progress note, the applicant reported persistent complaints of low back pain, 9-10/10 without medications versus 5-6/10 with medications. It was stated that the applicant had tried to wean off of Norco on the grounds that he believed it was causing some moodiness, loss of energy, and loss of motivation. The attending provider felt that the applicant would, however, need to continue Norco for the time being and/or consider

detoxifying through a form of program as opposed to discontinuing on an outpatient basis. Gabapentin was also renewed. The applicant's work status was reportedly unchanged. It did not appear that the applicant was working on this occasion.

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

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

**Norco 7.5/325mg, #120:** Overturned

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Weaning of Medications topic Page(s): 124.

**Decision rationale:** As noted on page 124 of the MTUS Chronic Pain Medical Treatment Guidelines, a slow taper of opioids is recommended. The longer an applicant has taken opioids, the more difficult they are to taper, page 124 of the MTUS Chronic Pain Medical Treatment Guidelines further notes. Page 124 of the MTUS Chronic Pain Medical Treatment Guidelines goes on to comment that applicants with multiple comorbidities and/or complex conditions should be referred to an addiction medicine specialist and/or psychiatrist to facilitate the weaning process. Here, the attending provider had posited that the applicant had developed discomforting symptoms of opioid withdrawal while attempting to withdraw from opioids on an outpatient basis. The attending provider stated that he was intent on slowly tapering the applicant off of opioids on or around the date of the request. The applicant had seemingly diminished opioid consumption from eight tablets daily to four tablets daily on or around the date of the request. Continuing Norco at the rate proposed by the attending provider, thus, was indicated as part and partial of the "slow taper" process endorsed on page 124 of the MTUS Chronic Pain Medical Treatment Guidelines. Therefore, the request was medically necessary.