

Case Number:	CM14-0024493		
Date Assigned:	06/11/2014	Date of Injury:	12/24/1999
Decision Date:	08/13/2014	UR Denial Date:	02/14/2014
Priority:	Standard	Application Received:	02/26/2014

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 Neurology, has a subspecialty in Neuromuscular Medicine and is licensed to practice in New Jersey. 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 patient is a 66 year old woman who sustained a work-related injury on December 24, 1999. Subsequently, she developed right knee and shoulder pain. According to a note dated on January 10, 2000, the patient was complaining of right knee pain exacerbated by activity. Her physical examination demonstrated no limitation of range of motion, good gait velocity and normal knee stability. The patient was reported to have peripheral neuropathy the provider requested authorization to continue hydrocodone and tramadol.

IMR ISSUES, DECISIONS AND RATIONALES

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

HYDROCODONE 5MG/300MG TABLETS QTY: 180.00: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 88-89, 93.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Criteria for use of opioids Page(s): 179.

Decision rationale: According to MTUS guidelines, Norco (Hydrocodone/Acetaminophen) is a synthetic opioid indicated for the pain management but not recommended as a first line oral analgesic. In addition and according to MTUS guidelines, ongoing use of opioids should follow specific rules:(a) Prescriptions of opioid drugs need to come from a single provider, and from a

single pharmacy. (b) The lowest possible dose should be prescribed to improve pain and function and taken as prescribed.(c) Office: Ongoing review and documentation of pain relief, functional status, appropriate medication use, and side effects.The pain assessment should include: current pain; the least reported pain over the period since last assessment; average pain; intensity of pain after taking the opioid; how long it takes for pain relief; and how long pain relief lasts. Satisfactory response to treatment may be indicated by the patient's decreased pain, increased level of function, or improved quality of life. Information from family members or other caregivers should be considered in determining the patient's response to treatment. There is no clear justification for the need to continue the use of Hydrocodone. There is no clear documentation of the severity of pain, the need for opioids rather than first line pain medications, functional and pain improvement with previous use of Hydrocodone, compliance of patient to his medications. Therefore, the prescription of Hydrocodone 5mg/300mg tablets is not medically necessary.

TRAMADOL 100MG TABLETS QTY: 180.00: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 88-89,93.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Tramadol Page(s): 113.

Decision rationale: According to MTUS guidelines, Ultram (Tramadol) is a synthetic opioid indicated for the pain management but not recommended as a first line oral analgesic. In addition and according to MTUS guidelines, ongoing use of opioids should follow specific rules:(a) Prescriptions of opioid drugs need to come from a single provider, and from a single pharmacy. (b) The lowest possible dose should be prescribed to improve pain and function and taken as prescribed.(c) Ongoing review and documentation of pain relief, functional status, appropriate medication use, and side effects.There is no clear documentation of pain and functional improvement with previous use of the Ultram and continuous documentation of patient compliance to his medications. Therefore, the prescription of Tramadol 100mg # 180 is not medically necessary.