

Case Number:	CM14-0038713		
Date Assigned:	06/27/2014	Date of Injury:	04/20/2011
Decision Date:	08/18/2014	UR Denial Date:	03/27/2014
Priority:	Standard	Application Received:	04/02/2014

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 Anesthesiology, 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:

The injured worker is a 66 year old male who sustained an injury on 04/20/11 when he struck his right shoulder on bathroom stall door. The injured worker was assessed with complete right shoulder rotator cuff rupture. Prior treatment included medications, chiropractic therapy, physical therapy, transcutaneous electrical nerve stimulation (TENS) unit, massage, and home exercise program. Medications included Norco 10/325mg. Prior urine drug screen findings from 12/13 were consistent with Norco use. The injured worker was seen on 02/12/14 with continuing complaints of pain in the right shoulder that was well controlled with Norco. The injured worker reported more than 50% relief with Norco with pain scores 2-3/10 on the visual analog scale with medications. Without medications the injured worker was reported to have severe pain 8-9/10 on the visual analog scale. The injured worker was also utilizing Naprosyn or naproxen for pain. Physical examination noted positive impingement signs in the right shoulder. There was no evidence for neurological deficit. Reflexes were slightly reduced at the right biceps. The injured worker was recommended to continue with Norco at four to six hours at one tablet every four to six hours with a maximum of four per day. The injured worker described improvement of function with Norco. Follow up on 03/13/14 noted no change in pain scores. Physical examination was also unchanged at this visit. There was loss of range of motion in the right shoulder. There was continued reported efficacy with the use of Norco. Updated urine toxic screen was ordered at this visit. The requested Norco 10/325mg #120 was denied by utilization review on 03/27/14.

IMR ISSUES, DECISIONS AND RATIONALES

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

120 tablets of Norco 10/325 mg: Overturned

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids, specific drug list Page(s): 88-89.

Decision rationale: Within the clinical documentation submitted for review there was clear evidence for efficacy of Norco in terms of pain relief and functional improvement. The injured worker reported at least 50% improvement of pain and functional improvement. There was no evidence of any aberrant medication use to date. Per the MTUS Chronic Pain Guidelines, short acting narcotics such as Norco can be considered medically indicated for the treatment of moderate to severe musculoskeletal complaints. There should be ongoing assessments establishing the efficacy of short acting narcotics such as Norco in terms of pain relief and functional improvement. As the clinical documentation submitted for review established the efficacy of Norco, this request is medically necessary.