

Case Number:	CM14-0048260		
Date Assigned:	07/07/2014	Date of Injury:	09/28/2006
Decision Date:	09/05/2014	UR Denial Date:	03/18/2014
Priority:	Standard	Application Received:	04/16/2014

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 bilateral knee pain reportedly associated with an industrial injury of September 28, 2006. Thus far, the applicant has been treated with the following: Analgesic medications; opioid therapy; transfer of care to and from various providers in various specialties; earlier multiple knee surgeries; and apparent imposition of permanent work restrictions. In a January 12, 2010 medical legal evaluation, it was acknowledged that the applicant was using Hydrocodone and unspecified anti-inflammatory medication as of that point in time. The applicant was described as having reached maximum medical improvement. A 7% whole percent impairment rating and permanent work restrictions were imposed. It was suggested that the applicant was working in the construction industry as of that point in time, however in another medical legal evaluation of March 6, 2012; it was acknowledged that the applicant was using Hydrocodone and Naprosyn for pain relief. The applicant reported 2-4/10 knee pain, improved with medications. The applicant stated the symptoms of locking, clicking, popping, and/or negotiating stairs all improved with pain medications. The applicant was given a 7% whole person impairment rating, once again. It was stated that the applicant was not working at this point in time. On June 3, 2014, the applicant presented with persistent complaints of bilateral knee pain, left greater than right, prescription for Norco and Voltaren gel were endorsed. The applicant was described permanent and stationary. No discussion of medication efficacy was incorporated into this particular progress note. On March 4, 2014, the applicant was described as having continued pain about the bilateral knees owing to a meniscal degeneration and osteoarthritis of the same. MRI imaging, Voltaren gel, and Norco were again endorsed. Again, there was no mention of how (or if) Norco was proving efficacious here.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco #120: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines California Chronic Pain Medical Guidelines, Opioids.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines When to Continue Opioids topic Page(s): 80.

Decision rationale: As noted on page 80 of the MTUS Chronic Pain Medical Treatment Guidelines, the cardinal criteria for continuation of opioid therapy includes evidence of successful return to work, improved functioning, and/or reduced pain achieved as a result of the same. In this case, however, the applicant no longer appears to be working. While earlier medical legal evaluations in 2010 and 2012 did suggest that opioid therapy had proven beneficial as of that point in time, most recent primary treating provider progress notes in 2014 made no mention of any ongoing reductions in pain or continuing improvements in function achieved as a result of ongoing usage of Norco. This, coupled with the fact that the applicant is no longer working, does not make a compelling case for continuing the same. Therefore, the request is not medically necessary.