

Case Number:	CM14-0050145		
Date Assigned:	07/07/2014	Date of Injury:	07/25/2003
Decision Date:	09/05/2014	UR Denial Date:	03/27/2014
Priority:	Standard	Application Received:	04/17/2014

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 and shoulder pain reportedly associated with an industrial injury of July 25, 2003. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representation; and opioid therapy. In a Utilization Review Report dated March 27, 2014, the claims administrator partially certified a request for Norco, reportedly for weaning purposes, while denying a request for spinal cord stimulator trial outright. The claims administrator stated that the applicant had not received psychological claims for the procedure in question. The applicant's attorney subsequently appealed. In a January 2014 progress note, the applicant was placed off of work, on total temporary disability. Authorization was sought for psychological reevaluation prior to pursuit of possible spinal cord stimulator implantation. Skelaxin, Norco, and Celebrex were endorsed. The applicant is to follow up with her psychiatrist. The applicant had remained off of work, it was acknowledged. Constant neck, shoulder, elbow, hand, and bilateral knee and bilateral ankle pain were reported. The applicant weighed 254 pounds, it was acknowledged. The applicant was having difficulty performing even basic activities of daily living such as movement and walking, it was stated. The applicant had superimposed issues of depression and anxiety, it was further noted. On February 11, 2014, the applicant stated that she was interested in a spinal cord stimulator trial. The applicant was using Norco, Skelaxin, Celebrex, and Lunesta. 7/10 pain with medications and 10/10 without medication was appreciated. The applicant was asked to pursue psychological clearance evaluation. On February 19, 2014, the applicant was again placed off of work, on total temporary disability, with complaints of highly variable multifocal pain, ranging anywhere from 3-10/10. In a psychological office visit of October 9, 2013, the applicant was described as trying to take better responsibility for her recovery. On January 2, 2014, the applicant had expressed some motivation to try and lose weight. The

remainder of the file was surveyed. There was no explicit mention of the applicant's has had psychological evaluation stating that the applicant was a suitable candidate for spinal cord stimulator trial. On September 11, 2013, the attending provider wrote that the applicant's diagnoses included chronic low back and neck pain with various radiographic changes noted on MRI imaging. The applicant did have evidence of a sensory and motor polyneuropathy noted on electrodiagnostic testing of May 14, 2010; it was noted and was status post left total knee arthroplasty. There was no mention of the applicant having had any prior lumbar spine surgery on that occasion. However, in a medical-legal evaluation of June 24, 2013, it was acknowledged that the applicant had undergone a lumbar laminectomy surgery at L4-L5 and L5-S1 in 1980s. The medical-legal evaluator did conduct a fairly comprehensive survey of records. The medical-legal evaluator survey of records did not uncover evidence of the record in which the applicant had undergone a psychological clearance evaluation to determine the applicant's suitability for spinal cord stimulator trial through that point in time.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco 10/325mg #180: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids, criteria for use.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines When to Continue Opioids 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 include evidence of successful return to work, improved functioning, and/or reduced pain achieved a result of the same. In this case, however, the applicant is off of work, on total temporary disability. The applicant's pain complaints are consistently described as in the 7/10 range or greater. None of the attending providers have outlined any clear, concrete, or tangible improvement in function achieved as a result of ongoing Norco therapy. Therefore, the request is not medically necessary.

(1) Dual Lead Spinal Cord Stimulator Trial: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Spinal Cord Stimulation (SCS). Decision based on Non-MTUS Citation ODG(The Official Disability Guidelines), Low back-Lumbar & Thoracic (Acute & Chronic).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Psychological Evaluations, IDDS and SCS Page(s): 101.

Decision rationale: As noted on page 101 of the MTUS Chronic Pain Medical Treatment Guidelines, psychological evaluations are recommended pre-spinal cord stimulator trial implantation. In this case, while the applicant's primary treating provider has seemingly recommended psychological clearance evaluation on several occasions, it does not appear that

the applicant has, in fact, received a precursor psychological clearance evaluation before the request for spinal cord stimulator trial in question was made. Therefore, the request is not medically necessary.