

Case Number:	CM14-0058811		
Date Assigned:	07/09/2014	Date of Injury:	08/02/2013
Decision Date:	09/05/2014	UR Denial Date:	04/18/2014
Priority:	Standard	Application Received:	04/29/2014

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 has filed a claim for chronic low back pain reportedly associated with an industrial injury of August 2, 2013. Thus far, the applicant has been treated with the following: analgesic medications; transfer of care to and from various providers in various specialties; attorney representation; unspecified amounts of physical therapy; and opioid therapy. In a utilization report dated April 18, 2014, the claims administrator partially certified a request for tramadol, apparently for weaning purposes, citing a lack of supporting documentation on the part of attending provider. The applicant's attorney subsequently appealed. In a handwritten progress note dated September 11, 2013, the applicant was apparently returned to regular duty work. In a narrative report of the same dates, the applicant was described as having knee, wrist, and low back pain, all of which are improving. Motrin and Robaxin were endorsed as of that point in time. Multiple x-rays and multiple body parts were likewise endorsed. On June 20, 2014, the applicant presented with multifocal wrist, shoulder, low back, and bilateral knee pain ranging from 5 to 7/10. A 30-pound lifting limitation was endorsed. Motrin, Robaxin, and tramadol were all renewed. It was stated that the applicant is pending left shoulder surgery. There was no mention or discussion of medication efficacy incorporated into the progress note. On May 9, 2014, the attending provider acknowledged that the applicant was off of work, on total temporary disability. The attending provider complained that numerous treatments had been denied by the claims administrator. The attending provider suggested that the applicant should be maintained on oral medications in the interim. The applicant was apparently issued prescriptions for Tramadol and Norco.

IMR ISSUES, DECISIONS AND RATIONALES

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

TRAMADOL 50MG #90 WITH 2 REFILLS: Upheld

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

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

Decision rationale: The request for tramadol, a synthetic opioid, is not medically necessary, medically appropriate, or indicated here. As noted on page 80 of the MTUS Chronic Pain Medical Treatment Guidelines, the cardinal criteria for continuation of opioid therapy include evidence successful return to work, improved functioning, and/or reduced pain achieved as a result of the same. In this case, however, the applicant is off of work, on total temporary disability. The applicant's pain complains seemingly persists despite ongoing usage of tramadol. The attending provider has not recounted any reductions in pain or improvements in function achieved with ongoing usage of Tramadol. Therefore, the request is not medically necessary.