

Case Number:	CM14-0073840		
Date Assigned:	07/16/2014	Date of Injury:	04/15/1999
Decision Date:	09/16/2014	UR Denial Date:	05/07/2014
Priority:	Standard	Application Received:	05/21/2014

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 Physical Medicine and Rehabilitation, has a subspecialty Interventional Spine 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 patient is a 65-year-old male with a date of injury of 04/15/1999. The listed diagnoses per [REDACTED] are: Left knee arthropathy and Neuropathic pain secondary to left knee injury. According to the progress report 04/15/2014, the patient presents with left knee pain. The patient's current VAS score is noted at 3-4/10. He currently utilizes Norco 10/325 as necessary for general pain control. The provider states the patient's condition remains relatively stable. Examination revealed positive patellar sign in the left knee with some edema noted. There is a positive McMurray's with atrophy of the left quadriceps muscles and weakness over the quadriceps muscle. The left knee is weak in flexion at 4+/5 to 5/5. The patient's current functional status remains unchanged and the pain levels remained mild to moderate and it can increase very significantly with activity. Norco does significantly decrease his pain and helps improve his functions and activities of daily living. The provider requests a refill of Norco 10/325 #150. Utilization review denied the request of 05/05/2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco 10/325mg, 1-2 tablets, every 3-4 hours as needed, # 150: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 91, 78-80, 124.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioid
Page(s): 88-89.

Decision rationale: This patient presents with chronic left knee pain. The provider is requesting a refill of Norco 10/325 mg 1 to 2 tablets to be taken every 3 to 4 hours as needed, #150. The MTUS Guidelines pages 88 and 89 states that pain should be assessed at each visit, and functioning should be measured at 6-month intervals using a numerical scale or validated instrument. The MTUS page 78 also requires documentation of the 4A's (analgesia, ADLs, adverse side effects, and adverse behavior), as well as pain assessment or outcome measures that include current pain, average pain, least pain, intensity of pain after taking the opioid, time it takes for medication to work and duration of pain relief. The medical file provided for review includes progress reports 11/22/2013, 02/18/2014 and 04/15/2014. Each report indicates the patient is utilizing Norco, which reduces his pain level and improves his function and activities of daily living. The provider discusses analgesia but provides no details of specific functional improvement taking this medication. Furthermore, the provider does not take account of adverse effects, aberrant behaviors and does not provide a Urine drug screen for monitoring of medication. Such as, Norco 10/325mg, 1-2 tablets, every 3-4 hours as needed, # 150 is not medically necessary.