

Case Number:	CM14-0194265		
Date Assigned:	12/02/2014	Date of Injury:	11/14/2002
Decision Date:	01/20/2015	UR Denial Date:	11/05/2014
Priority:	Standard	Application Received:	11/20/2014

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 low back pain reportedly associated with an industrial injury of November 14, 2002. In a Utilization Review Report dated November 5, 2014, the claims administrator denied a request for Norco. The claims administrator stated that its decision was based on a progress note dated October 29, 2014. The claims administrator stated that the attending provider failed to outline any meaningful benefit with ongoing Norco usage. The applicant's attorney subsequently appealed. In an applicant questionnaire dated October 29, 2014, the applicant reported 8/10 pain. The applicant stated that he was taking two to two and a half tablets of pain medications on a daily basis. The applicant denied any side effects with medications. In a progress note of the same date, October 29, 2014, the applicant reported worsening low back pain. The note was handwritten and difficult to follow. The applicant was apparently using Talwin and Norco for pain relief. At the bottom of the report, a prescription for Norco was endorsed. It was suggested that Talwin was not generating appropriate analgesia. The applicant's work status was not clearly outlined. The attending provider complained that the applicant had to fill the medications through his personal health insurance despite the fact that the medications were reportedly being given to ameliorate an industrial issue. The applicant was apparently using a cane to move about. In an applicant questionnaire dated October 3, 2014, the applicant stated that he needed assistance to perform various activities of daily living and/or stated that said activities were taking than customary owing to pain complaints, including household chores, laundry, using the phone, cooking, shopping, eating, and negotiating stairs. 7/10 pain was reported. The applicant stated that his medications were helping, admittedly through preprinted checkboxes. In an October 2, 2014 progress note, the applicant reported 9/10 low back pain. Norco was renewed. The note was very difficult to follow. One section of the note stated that Norco had been used

for years but was not helping. The applicant's work status was, once again, not outlined. The applicant was also using Valium, it was stated.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco 10/325mg #120: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines On Going Opioid Management.

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 include evidence of successful return to work, improved functioning, and/or reduced pain achieved as a result of the same. Here, however, the applicant does not appear to be working. The applicant reported 9/10 pain on an office visit of October 2, 2014, despite ongoing Norco usage. The applicant reported 7/10 pain on a questionnaire dated October 3, 2014. On a questionnaire dated October 29, 2014, the applicant reported 8/10 pain. Multiple progress notes in question also suggested that the applicant was having difficulty performing activities of daily living as basic as ambulating, household chores, laundry, and cooking, shopping, and negotiating stairs, despite ongoing Norco consumption. All of the foregoing, taken together, did not make a compelling case for continuation of the same. Therefore, the request was not medically necessary.