

<b>Case Number:</b>	CM14-0202839		
<b>Date Assigned:</b>	12/15/2014	<b>Date of Injury:</b>	09/22/2006
<b>Decision Date:</b>	01/31/2015	<b>UR Denial Date:</b>	11/11/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	12/04/2014

### 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 Neurology, has a subspecialty in Neuromuscular Medicine and is licensed to practice in New Jersey. 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 injured worker is a 44 year old female with a date of injury of September 22, 2006. Results from the injury include low back pain radiating to both buttocks. Diagnosis included chronic low back pain, lumbar discogenic pain, lumbar degenerative disc disease, bilateral chronic L5-S1 radiculitis, lumbar myofascial pain syndrome, and chronic pain syndrome. Current treatment modalities include Norco, Motrin, flexeril, and Lyrica. Magnetic resonance imaging scan from 2006 revealed degenerative disc disease with facet arthropathy bilaterally and impingement of the right L4-5 neuroforamen with possible impingement of the right L4-L5 neuroforamen. Progress report dated November 3, 2014 showed tenderness in the paraspinal muscles and in facets. Range of motion was severely decreased in flexion and extension. Treatment plan was for Norco and yoga. Utilization review form dated November 11, 2014 non certified Norco 5/325mg quantity 60 due to noncompliance with MTUS guidelines recommendations.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Norco 5/325mg quantity 60:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Criteria for use of opioids. Page(s): 76-79.

**Decision rationale:** According to MTUS guidelines, Norco (Hydrocodone/Acetaminophen) is a synthetic opioid indicated for the pain management but not recommended as a first line oral analgesic. In addition and according to MTUS guidelines, ongoing use of opioids should follow specific rules:(a) Prescriptions from a single practitioner taken as directed, and all prescriptions from a single pharmacy.(b) The lowest possible dose should be prescribed to improve pain and function.(c) Office: Ongoing review and documentation of pain relief, functional status, appropriate medication use, and side effects. Pain assessment should include: current pain; the least reported pain over the period since last assessment; average pain; intensity of pain after taking the opioid; how long it takes for pain relief; and how long pain relief lasts. Satisfactory response to treatment may be indicated by the patient's decreased pain, increased level of function, or improved quality of life. Information from family members or other caregivers should be considered in determining the patient's response to treatment. The 4 A's for Ongoing Monitoring: Four domains have been proposed as most relevant for ongoing monitoring of chronic pain patients on opioids: pain relief, side effects, physical and psychosocial functioning, and the occurrence of any potentially aberrant (or non-adherent) drug-related behaviors. These domains have been summarized as the "4 A's" (analgesia, activities of daily living, adverse side effects, and aberrant drug taking behaviors). The monitoring of these outcomes over time should affect therapeutic decisions and provide a framework. There is no objective documentation of functional and pain improvement with previous use of hydrocodone. There is no documentation of continuous compliance of patient to her medications. There is no documentation of continuous monitoring of the drug safety and side effects. Therefore, the prescription of Norco 5/325mg quantity 60 is not medically necessary.