

Case Number:	CM14-0203573		
Date Assigned:	12/16/2014	Date of Injury:	09/27/2010
Decision Date:	02/09/2015	UR Denial Date:	11/18/2014
Priority:	Standard	Application Received:	12/05/2014

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 and bilateral foot pain with derivative complaints of depression reportedly associated with an industrial injury of September 27, 2010. In a Utilization Review Report dated November 18, 2014, the claims administrator denied a request for Norco. The claims administrator did, however, approve Elavil. The claims administrator invoked a variety of non-MTUS guidelines, including non-MTUS Chapter 6 ACOEM Guidelines and non-MTUS ODG guidelines in portions of its rationale. A November 3, 2014 progress note was also referenced. The applicant's attorney subsequently appealed. In said November 3, 2014 progress note, the applicant reported persistent complaints of low back pain. The applicant was using Norco and Motrin. The applicant had undergone earlier ankle hardware removal surgery but did not have residual low back pain complaints. Elavil and Norco were endorsed. Permanent work restrictions were renewed. There was no explicit discussion of medication efficacy transpired on this date. On September 5, 2014, the applicant reported persistent complaints of low back pain. The applicant was using Motrin and Norco on this date. The applicant was using a cane to move about, it was acknowledged. Permanent work restrictions were renewed. It was not clearly stated whether the applicant was or was not working with said limitation in place, although this did not appear to the case. On August 4, 2014, Norco, Elavil, and lumbar MRI imaging were sought. Permanent work restrictions were renewed. The applicant was using a cane on this date. Once again, there was no explicit discussion of medication efficacy.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco 10/325mg, #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Hydrocodone (Vicodin, Lortab). Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Opioids, criteria for use and ACOEM Practice Guidelines, Chapter 7: Independent Medical Examinations and Consultations, page 116

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

Decision rationale: The request for Norco, a short-acting opioid, was 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 of successful return to work, improved functioning, and/or reduced pain achieved as a result of the same. Here, the applicant did not appear to be working with permanent limitations in place. Several progress notes, referenced above, throughout late 2014 contained no references to support any quantifiable decrements in pain or material improvements in function achieved as a result of ongoing Norco usage. Rather, the attending provider seemingly renewed Norco from visit to visit without any explicit discussion of whether or not Norco was or was not proving effective. Therefore, the request is not medically necessary.