

<b>Case Number:</b>	CM15-0106778		
<b>Date Assigned:</b>	06/11/2015	<b>Date of Injury:</b>	05/09/1991
<b>Decision Date:</b>	07/16/2015	<b>UR Denial Date:</b>	05/27/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/03/2015

### 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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:  
 State(s) of Licensure: Texas, New York, California  
 Certification(s)/Specialty: Preventive Medicine, Occupational Medicine

### 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 59-year-old who has filed a claim for chronic low back pain (LBP) reportedly associated with an industrial injury of May 9, 1991. In a utilization review report dated May 27, 2015, the claims administrator failed to approve a request for Opana. The claims administrator referenced a May 19, 2015 RFA form and associated progress note of the same date in its determination. The applicant's attorney subsequently appealed. On said RFA form dated May 19, 2015, Norco, Opana, and Lodine were endorsed. In an associated progress note on the same date, May 19, 2015, the applicant reported 9/10 pain complaints. The applicant was using a TENS unit. The applicant was using Lodine, Lyrica, Soma, Norco, Opana, and Zocor, it was reported. The applicant had comorbid hepatitis C, it was further noted. The applicant's primary pain generator was the low back, it was suggested, following earlier failed lumbar spine surgery. The note was very difficult to follow and mingled historical issues with current issues. The attending provider stated that the applicant's ability to perform self-care, personal hygiene, and cooking for 10 minutes continuously had been ameliorated as a result of ongoing medication consumption. The applicant was not working, however, the treating provider acknowledged. Norco, Lodine, and Opana were ultimately renewed.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Opana 5 mg #60:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines 7) When to Continue Opioids Page(s): 80.

**Decision rationale:** No, the request for Opana, an opioid agent, 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, however, the applicant was off of work, it was acknowledged on the May 19, 2015 progress note at issue. The applicant's pain complaints were scored as severe, in the 9/10 range, it was reported on that date. While the attending provider did state that the applicant's medications were beneficial, these reports were, however, outweighed by the applicant's failure to return to work and the attending provider's failure to outline meaningful or material improvements in function (if any) effected as a result of ongoing medication consumption. The attending provider's commentary to the effect that the applicant's ability to perform self-care, personal hygiene, and cook for up to 10 minutes continuously had been effected as a result of ongoing medication consumption did not constitute evidence of a meaningful, material, or substantive improvement in function effected as a result of ongoing Opana usage. Therefore, the request was not medically necessary.