

<b>Case Number:</b>	CM15-0131342		
<b>Date Assigned:</b>	07/17/2015	<b>Date of Injury:</b>	11/03/2009
<b>Decision Date:</b>	08/17/2015	<b>UR Denial Date:</b>	07/02/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/07/2015

### 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 56-year-old who has filed a claim for chronic neck, shoulder, hand, wrist, and thumb pain reportedly associated with an industrial injury of November 3, 2009. In a Utilization Review report dated July 2, 2015, the claims administrator failed to approve a request for Norco. The claims administrator referenced a June 25, 2015 RFA form in its determination and an associated progress note of June 3, 2015. The applicant's attorney subsequently appealed. On February 3, 2015, the applicant was given a refill of Tylenol No. 3. On January 6, 2015, the applicant was described as unemployed. 5/10 neck pain and headaches were reported. On an RFA form dated June 25, 2015, Norco was endorsed. In an associated progress note dated June 10, 2015, the applicant presented reporting 5-7/10 frequent-to-constant neck, shoulder, thumb, and wrist pain complaints. The applicant was described as unemployed. The attending provider stated that Norco was 50% to 60% effective in terms of reducing pain but did not outline any improvements in function effected as a result of ongoing Norco usage. In an earlier note dated May 11, 2015, it was acknowledged that the applicant was concurrently using marijuana.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Norco 5/325mg, #90 for pain: Upheld**

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines 6) When to Discontinue Opioids; 7) When to Continue Opioids Page(s): 79; 80.

**Decision rationale:** No, the request for Norco, a short-acting opioid, was not medically necessary, medically appropriate, or indicated here. As noted on page 79 of the MTUS Chronic Pain Medical Treatment Guidelines, immediate discontinuation of opioids is suggested in applicants who are engaged in concurrent usage of illicit drugs. Here, the applicant was described as concurrently using marijuana, an illicit drug, on May 11, 2015. Discontinuing Norco, thus, was a more appropriate option than continuing the same. The applicant, furthermore, seemingly failed to meet criteria set forth on page 80 of the MTUS Chronic Pain Medical Treatment Guidelines for continuation of opioid therapy. Namely, the applicant had failed to return to work, it was reported on several occasions, referenced above. The applicant was consistently described as unemployed. While the attending provider stated on June 10, 2015 that the applicant's pain scores were reduced by 50% to 60% with ongoing Norco usage, these reports were, however, outweighed by the applicant's failure to return to work and the attending provider's failure to outline meaningful, material, and/or substantive improvements in function (if any) achieved as a result of ongoing Norco usage, and the applicant's concomitant usage of marijuana, an illicit substance. Therefore, the request was not medically necessary.