

Case Number:	CM15-0134014		
Date Assigned:	07/22/2015	Date of Injury:	01/08/2010
Decision Date:	09/02/2015	UR Denial Date:	07/06/2015
Priority:	Standard	Application Received:	07/10/2015

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 low back pain (LBP) reportedly associated with an industrial injury of January 8, 2010. In a Utilization Review report dated July 6, 2015, the claims administrator failed to approve a request for Norco. The claims administrator referenced an RFA form received on June 25, 2015 in its determination, along with associated progress notes of June 19, 2015 and May 22, 2015. The applicant's attorney subsequently appealed. On an RFA form dated May 22, 2015, Norco was renewed. In an associated progress note of June 19, 2015, the applicant reported ongoing complaints of low back pain, 9/10 without medications versus 5/10 with medications. The attending provider maintained that the applicant's analgesic medications were ameliorating his ability to perform light household chores and shopping. The applicant was severely depressed, however, it was acknowledged. The applicant was on Norco, Lidoderm, Motrin, Flexeril, Neurontin, Prilosec, tramadol, and Cymbalta, it was reported. Multiple medications were renewed. The applicant's work status was not explicitly stated; however, the attending provider reported in the Activities of Daily Living section of the note that the applicant's pain were moderately to severely interfering with work, concentration, mood, sleeping, and overall day-to-day functioning.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco 10/325mg #150 (6-19-15): Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 75, 78-80, 124.

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

Decision rationale: No, the request for Norco, a short-acting opioid, is 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 seemingly off of work, it was suggested (but not clearly stated) on June 19, 2015, at which point the treating provider reported that the applicant's pain complaints were interfering with the applicant's ability to work, concentrate, sleep, and function on a daily basis. While the treating provider did state that the applicant's medications were beneficial, these subjective reports were 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 effected as a result of ongoing medication consumption (if any). Therefore, the request is not medically necessary.