

<b>Case Number:</b>	CM15-0136951		
<b>Date Assigned:</b>	07/24/2015	<b>Date of Injury:</b>	04/10/2013
<b>Decision Date:</b>	08/27/2015	<b>UR Denial Date:</b>	07/02/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/15/2015

### 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 45-year-old who has filed a claim for chronic neck, shoulder, hand, wrist, and knee pain reportedly associated with an industrial injury of April 10, 2013. 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 1, 2015 progress note in its determination. The applicant's attorney subsequently appealed. On an appeal letter dated July 17, 2015, the attending provider appealed previously denied Norco. The attending provider stated that the applicant was working on a part-time basis, at a rate of 4 hours a day. The attending provider, somewhat incongruously, referenced to both the now renumbered MTUS 9792.20f and the current citation in MTUS 9792.20e in his appeal letter. The attending provider contented that the applicant had improved as a result of ongoing medication consumption. In a July 16, 2015 progress note, the applicant reported ongoing complaints of shoulder, elbow, hand, and wrist pain. The applicant was using Norco, Motrin, Prilosec, and Lidoderm, it was reported. The applicant was given multiple medication refills. A rather proscriptive 10- to 15-pound lifting limitation was endorsed. An orthopedic consultation was sought. The attending provider did not state whether the applicant was or was not working with said 10- to 15-pound lifting limitation in place. The attending provider stated that recent drug testing was consistent with currently prescribed medications. The applicant was also given time limitation of working no more than 4 hours a day. In a Qualified Medical Evaluation dated May 28, 2015, the applicant reported multifocal complaints of hand, wrist, knee, neck, and low back pain. The applicant stated that she was able to work on a part-time basis, at rate of 4 hours a day. In a June 1, 2015 progress note, the attending provider contented Norco had reduced the applicant's pain scores from 9/10 to 5/10.

## **IMR ISSUES, DECISIONS AND RATIONALES**

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

**Retro Norco 10/325mg 1-2 tabs a day #60:** Overturned

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

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

**Decision rationale:** Yes, the request for Norco, a short-acting opioid, was medically necessary, medically appropriate, and 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 had apparently successfully returned to part-time work at rate of 4 hours a day, both treating provider and medical-legal evaluator contented on multiple office visits of mid-2015, referenced above. The applicant was deriving appropriate analgesia as a result of ongoing Norco usage, it was further reported, with a drop in pain scores from 9/10 without medications to 5/10 with medications suggested by the prescribing provider. It did appear, in short, that the applicant had profited from ongoing Norco usage. Continuing the same, on balance, was indicated. Therefore, the request was medically necessary.