

<b>Case Number:</b>	CM15-0139338		
<b>Date Assigned:</b>	07/29/2015	<b>Date of Injury:</b>	11/13/2003
<b>Decision Date:</b>	09/02/2015	<b>UR Denial Date:</b>	06/17/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/17/2015

### 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 44-year-old who has filed a claim for chronic low back pain (LBP) reportedly associated with an industrial injury of November 13, 2003. In a Utilization Review report dated June 17, 2015, the claims administrator failed to approve a request for Norco. The claims administrator referenced an RFA form dated June 10, 2015 and an associated progress note of April 30, 2015 in its determination. The applicant's attorney subsequently appealed. On December 11, 2014, the applicant reported multifocal complaints of low back, shoulder, knee, and neck pain, 6/10. The applicant reported ancillary issues with reflux. The applicant had received multiple invasive procedures over the course of the claim, including facet injections and SI joint blocks, it was reported. The applicant was also status post shoulder surgery. Norco and psychotherapy were endorsed. Permanent work restrictions imposed by a medical-legal evaluator were renewed. It was not clearly stated whether the applicant was or was not working, although this did not appear to be the case. In a March 2, 2015 psychological assessment, it was stated that the applicant was in fact smoking marijuana for pain while using Norco. On April 13, 2015, the applicant's permanent work restrictions were, once again, renewed. Norco was likewise renewed. Additional physical therapy was sought. 8/10 pain complaints were reported. Once again, it was not explicitly stated whether the applicant was or was not working with said permanent limitations in place, although this did not appear to be the case.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Norco 10-325mg q 8 hrs prn #80:** Upheld

**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; 6) When to Discontinue Opioids Page(s): 80; 79.

**Decision rationale:** No, 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, however, the applicant reported pain complaints as high as 8/10 on the April 13, 2015 progress note at issue. The attending provider failed to outline quantifiable decrements in pain or meaningful, material improvements in function (if any) effected as a result of ongoing Norco usage on that date. Page 79 of the MTUS Chronic Pain Medical Treatment Guidelines also recommends immediate discontinuation of opioids in applicants who are concurrently using illicit substances. A psychological evaluation dated March 2, 2015 suggested that the applicant was, in fact, concurrently using marijuana, an illicit substance. Discontinuing Norco, thus, appear to be a more appropriate option than continuing the same, given the foregoing. Therefore, the request was not medically necessary.