

Case Number:	CM15-0145628		
Date Assigned:	08/06/2015	Date of Injury:	09/05/2002
Decision Date:	09/10/2015	UR Denial Date:	07/21/2015
Priority:	Standard	Application Received:	07/27/2015

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 53-year-old who has filed a claim for chronic low back pain (LBP) reportedly associated with an industrial injury of December 5, 2002. On July 21, 2015, the claims administrator failed to approve a request for Norco. The claims administrator did approve an epidural steroid injection, Neurontin, and a pain management follow-up visit. The claims administrator referenced a June 15, 2015 office visit in its determination. The applicant's attorney subsequently appealed. On May 5, 2015, the applicant underwent a lumbar epidural steroid injection. On an undated applicant questionnaire seemingly attached to a March 23, 2015 office visit, the applicant suggested that he was working full duty while he was using Norco at a rate of three times a day. The applicant reported 4/10 pain complaints. Preprinted checkboxes were employed. In an associated progress note dated March 23, 2015, the attending provider stated that the applicant was working modified duty. The applicant had undergone earlier lumbar fusion surgery, it was reported. The applicant reported 4 to 5/10 back pain and 1/10 leg pain, aggravated by sitting, standing, and walking. The attending provider posited that usage of Norco was reducing the applicant's pain complaints by 50% and improving the applicant's standing and/or walking tolerance. Both Norco and Neurontin were renewed. The applicant was asked to try diet and exercise to lose weight. On a questionnaire dated April 20, 2015, the applicant stated that his medications were increasing his day-to-day activities. On an associated progress note of April 20, 2015, it was acknowledged that the applicant was working with restrictions in place. In an applicant questionnaire dated May 18, 2015, the applicant stated that his pain medications were ameliorating his sleep and performance of day-to-day activities. In an associated progress note of

May 18, 2015, the attending provider again reiterated the applicant was working modified duty and the use of Norco and Neurontin were ameliorating the applicant's ability to perform day-to-day activities of daily living.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco 10/325mg QTY: 120:00: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids for chronic pain Page(s): 91.

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 returned to work, it was reported on multiple office visits and questionnaires stated above. Ongoing usage of Norco was attenuating the applicant's pain complaints by as much as 50% and was ameliorating the applicant's ability to perform daily exercise and other household activities. Continuing the same, on balance, was indicated. Therefore, the request was medically necessary.