MAXIMUS Federal Services

Case Number:	CM15-0147544		
Date Assigned:	08/10/2015	Date of Injury:	07/26/2011
Decision Date:	09/10/2015	UR Denial Date:	06/30/2015
Priority:	Standard	Application Received:	07/29/2015

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 47-year-old who has filed a claim for chronic neck and shoulder pain with derivative complaints of depression and anxiety reportedly associated with an industrial injury of July 26, 2011. In a Utilization Review report dated June 30, 2015, the claims administrator failed to approve a request for Norco. A partial approval was issues, apparently for weaning or tapering purposes. An RFA form received on June 23, 2015 and an associated progress note of June 16, 2015 were referenced in the determination. The applicant's attorney subsequently appealed. On June 16, 2015, the applicant reported ongoing complaints of shoulder pain. The applicant was having difficulty performing activities of daily living as basic as driving, housekeeping, shopping, and lifting articles weighing greater than 10 pounds, it was reported. 6/10 pain complaints were reported. Ancillary complaints of neck pain were also evident. The applicant was on topical Voltaren, Prilosec, Pamelor, Norco, Klonopin, and Neurontin, it was reported. The applicant was not working and was unemployed, it was reported. The applicant had developed significant derivative complaints of depression, anxiety, sleep disturbance, and headaches, it was reported. Norco was seemingly renewed. The applicant was asked to enroll in a functional restoration program to try and diminish medication consumption. On August 13, 2015, the applicant reported ongoing complaints of neck and shoulder pain with superimposed issues with fibromyalgia. The attending provider stated that Norco was diminishing the applicant's complaints by 50%. The attending provider stated that the applicant's functionality was also improved as a result of ongoing usage but did not elaborate further. The applicant was

unemployed, it was reported. The applicant was asked to pursue a functional restoration program. Norco was renewed.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco 10/325mg #60: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints, Chapter 9 Shoulder Complaints, Chronic Pain Treatment Guidelines Opioids.

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, 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 was off of work and deemed unemployed, it was reported on both August 13, 2015 and June 16, 2015. While the attending provider did recount some reported reduction in pain scores by 50% reportedly effected as a result of ongoing opioid usage, these reports were, however, outweighed by the applicant's failure to return to work and the attending provider's reports on June 16, 2015 to the effect that the applicant was having difficulty performing activities of daily living as basic as lifting, shopping, driving, housekeeping, and the like. Therefore, the request was not medically necessary.