

Case Number:	CM15-0166508		
Date Assigned:	09/04/2015	Date of Injury:	01/26/1999
Decision Date:	10/13/2015	UR Denial Date:	07/21/2015
Priority:	Standard	Application Received:	08/25/2015

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 [REDACTED] beneficiary who has filed a claim for chronic hip and back pain reportedly associated with an industrial injury of January 26, 1999. In a Utilization Review report dated July 21, 2015, the claims administrator failed to approve a request for Norco. The claims administrator referenced a progress note dated July 14, 2015 in its determination. The applicant's attorney subsequently appealed. On said July 14, 2015 progress note, the applicant reported ongoing complaints of hip pain, 7/10. Activities of daily living as basic as sitting, standing, walking, driving, kneeling, and bending remained problematic, it was reported. Norco and Soma were renewed. The applicant's work status was not explicitly detailed, although it did not appear that the applicant was working. The attending provider contended that the applicant's medications were beneficial but did not elaborate further. On May 19, 2015, the applicant again reported 7/10 low back pain complaints. Protonix, Ultram, Soma, and Norco were, once again, renewed. The attending provider again stated that standing, walking, driving, negotiating stairs, bending, kneeling, all remained problematic. Once again, the applicant's work status was not explicitly detailed, although it did not appear that the applicant was working. On April 17, 2015, Soma, Norco, Protonix, tramadol, and multiple topical compounds were endorsed. Once again, the applicant's work status was not explicitly detailed.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 prescription of Norco 10/325mg #120: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Opioids, criteria for use.

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's work status was not reported on multiple office visits, referenced above, including on April 17, 2015, May 19, 2015, or July 14, 2015. Pain complaints as high as 7/10 were reported on July 14, 2015. Activities of daily living as basic as sitting, standing, walking, driving, negotiating stairs, bending, and kneeling all remained problematic, it was reported on that date. The attending provider failed to identify quantifiable decrements in pain or meaningful, material improvements in function (if any) effected as a result of ongoing Norco usage. Therefore, the request was not medically necessary.