

Case Number:	CM15-0180129		
Date Assigned:	09/22/2015	Date of Injury:	11/20/1997
Decision Date:	11/02/2015	UR Denial Date:	09/09/2015
Priority:	Standard	Application Received:	09/14/2015

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 low back pain (LBP) reportedly associated with an industrial injury of November 20, 1999. In a Utilization Review report dated August 31, 2015, the claims administrator failed to approve a request for Vicodin. The claims administrator referenced an August 31, 2015 office visit in its determination. The applicant's attorney subsequently appealed. On said August 31, 2015 office visit, the applicant reported ongoing complaints of low back pain radiating into the bilateral lower extremities. The applicant was using both Vicodin and tramadol, it was reported. 4-6/10 pain complaints with medications versus 8/10 without medications were reported. The attending provider contended that the applicant's ability to perform sitting, standing, and walking in unspecified amounts had been ameliorated as a result of ongoing medication consumption. The applicant's medication list included Vicodin, tramadol, Lyrica, Limbrel, Prilosec, and Lidoderm. Permanent work restrictions and Vicodin were renewed. The applicant was asked to try Zanaflex. The applicant was asked to pursue acupuncture. The applicant's permanent work restrictions were renewed. It was not clearly stated whether the applicant was or was not working with said limitations in place. The applicant had undergone earlier cervical spine surgery, it was reported. The applicant also had superimposed complaints of fibromyalgia, it was acknowledged.

IMR ISSUES, DECISIONS AND RATIONALES

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

Vicodin 5/300mg #75: 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 Vicodin, 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 clearly articulated on the August 31, 2015 office visit at issue, although it was suggested that the applicant was not working with permanent limitations in place. While the attending provider did outline low-grade reduction in pain scores reportedly achieved as a result of ongoing medication consumption, these reports were, however, outweighed by the applicant's seeming failure to return to work, the attending provider's failure to clearly articulate the applicant's work status, and the attending provider's failure to outline meaningful, material, and/or substantive improvements in function (if any) effected as a result of ongoing medication consumption. The attending provider's commentary to the effect that the claimant's ability to sit and stand in unspecified amounts had been ameliorated as a result of ongoing medication consumption did not constitute evidence of a substantive benefit derived as a result of ongoing Vicodin usage. Therefore, the request was not medically necessary.