MAXIMUS Federal Services

Case Number:	CM15-0187604		
Date Assigned:	09/29/2015	Date of Injury:	12/19/2010
Decision Date:	11/13/2015	UR Denial Date:	09/21/2015
Priority:	Standard	Application Received:	09/23/2015

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 knee pain syndrome reportedly associated with an industrial injury of December 19, 2010. In a Utilization Review report dated September 21, 2015, the claims administrator failed to approve a request for Norco. The claims administrator referenced a September 1, 2015 office visit and an associated RFA form of the same date in its determination. The applicant's attorney subsequently appealed. On March 7, 2015, the applicant was placed off of work, on total temporary disability, owing to ongoing complaints of knee and shoulder pain. The applicant's medication list included Norco, Ambien, Soma, Levoxyl, and Zestril, it was reported on this date. The applicant was apparently in the process of applying for Social Security Disability Insurance (SSDI), it was acknowledged. Multiple medications were renewed and/or continued. On August 8, 2015, the applicant was again placed off of work, on total temporary disability. Ongoing complaints of knee, shoulder, and low back pain were reported, highly variable, 5-10/10. The applicant was again placed off of work, while multiple medications including Norco, Ambien, Ativan, and Soma were all seemingly renewed and/or continued. On an RFA form of September 9, 2015, Vicodin, Ambien, MRI imaging of the bilateral knees and MRI imaging of the lumbar spine were all seemingly sought.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco 325/7.5mg #150: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009. Decision based on Non-MTUS Citation Official Disability Guidelines, Pain Chapter.

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 was off of work, on total temporary disability, it was reported on multiple office visits, referenced above, interspersed throughout mid and late 2015. An August 8, 2015 progress note suggested that the applicant was also in the process of applying for Social Security Disability Insurance (SSDI). Highly variable 5-10/10 pain complaints were reported on that date. The treating provider failed to identify meaningful, material, and/or substantive improvements in function (if any) effected as a result of ongoing Norco usage. Therefore, the request was not medically necessary.