

<b>Case Number:</b>	CM15-0189574		
<b>Date Assigned:</b>	10/01/2015	<b>Date of Injury:</b>	04/03/2001
<b>Decision Date:</b>	11/13/2015	<b>UR Denial Date:</b>	08/27/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/26/2015

### 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 41-year-old who has filed a claim for chronic low back pain (LBP) reportedly associated with an industrial injury of April 3, 2001. In a Utilization Review report dated August 27, 2015, the claims administrator failed to approve a request for Norco. The claims administrator referenced an August 20, 2015 RFA form and an associated August 17, 2015 office visit in its determination. The applicant's attorney subsequently appealed. On said August 17, 2015 office visit, the applicant reported ongoing complaints of low back pain radiating to lower extremities. The attending provider acknowledged that the applicant had used edible marijuana to attenuate his pain complaints, reportedly because the claims administrator had failed to provide timely authorization for opioid medications. The attending provider noted that the applicant had undergone earlier failed lumbar spine surgery. Norco was endorsed. The applicant underwent a drug testing in the clinic and apparently had tested positive for marijuana on this date. Despite the fact the drug, testing was consistent with the applicant's report, the treating provider nevertheless sent out the drug specimen for quantitative analysis. The applicant's work status was not stated.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Norco 10/325mg #100: 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 79 of the MTUS Chronic Pain Medical Treatment Guidelines, immediate discontinuation of opioids is suggested in applicants who are engaged in evidence of illicit substance abuse. In this case, the applicant was seemingly using marijuana, an illicit substance, as of the date in question, August 17, 2015. Discontinuation of opioid therapy with Norco appeared to be a more appropriate option than continuation of the same, per page 79 of the MTUS Chronic Pain Medical Treatment Guidelines. The applicant likewise seemingly failed to meet criteria set forth on page 80 of the MTUS Chronic Pain Medical Treatment Guidelines for continuation of opioid therapy, which included evidence of successful return to work, improved functioning, and/or reduced pain achieved because of opioid therapy. Here, however, the applicant's work status was not reported on the August 17, 2015 date of service, suggesting that the applicant was not working. The treating provider failed to identify quantifiable decrements in pain or meaningful, material improvements in function (if any) effected because of ongoing Norco usage. Therefore, the request was not medically necessary.