

Case Number:	CM15-0196336		
Date Assigned:	10/09/2015	Date of Injury:	03/21/2002
Decision Date:	11/30/2015	UR Denial Date:	09/29/2015
Priority:	Standard	Application Received:	10/06/2015

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 59-year-old who has filed a claim for chronic low back, knee, and hip pain reportedly associated with an industrial injury of March 21, 2002. In a Utilization Review report dated September 29, 2015, the claims administrator failed to approve a request for Tramadol. The claims administrator referenced a September 17, 2015 office visit in its determination. The applicant's attorney subsequently appealed. On September 17, 2015, the applicant was placed off of work, on total temporary disability, owing to multifocal complaints of low back, neck, and knee pain. The applicant's medication list included Norco, Tramadol extended release, Lidoderm patches, Celebrex, it was reported. The attending provider contended that the applicant needed medication refills and was able to perform unspecified household chores, including driving, as a result of ongoing medication consumption. 7/10 pain without medications versus 5/10 pain with medications was reported. Multiple medications, including the Tramadol at issue, were renewed, while the applicant was placed off of work, on total temporary disability. The applicant was incidentally described as moderately depressed.

IMR ISSUES, DECISIONS AND RATIONALES

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

Tramadol ER 150 mg #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Opioids for chronic pain.

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

Decision rationale: No, the request for Tramadol, a synthetic 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, as of the September 17, 2015 office visit at issue. While the attending provider stated that ongoing usage of Tramadol had diminished the applicant's pain complaints from 7/10 without medications to 5/10 with medications, these reports were, however, outweighed by the applicant's failure to return to work and the attending provider's failure to outline meaningful, material, and/or substantive improvements in function (if any) effected as a result of ongoing Tramadol usage. The attending provider's commentary on September 17, 2015 to the effect that the applicant's ability to perform household chores in unspecified amounts as a result of ongoing medication did not constitute evidence of a substantive improve achieved as a result of ongoing Tramadol usage and was, as stated previously, outweighed by the applicant's failure to return to work. Therefore, the request was not medically necessary.