

Case Number:	CM15-0197434		
Date Assigned:	10/12/2015	Date of Injury:	03/07/2000
Decision Date:	11/30/2015	UR Denial Date:	09/25/2015
Priority:	Standard	Application Received:	10/07/2015

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 72-year-old who has filed a claim for chronic neck, low back pain, and bilateral shoulder pain reportedly associated with an industrial injury of March 7, 2000. In a Utilization Review report dated September 25, 2015, the claims administrator failed to approve a request for Norco. The claims administrator referenced an RFA form received on September 17, 2015 and an office visit dated June 16, 2015 in its determination. The applicant's attorney subsequently appealed. On said June 16, 2015 office visit, the applicant reported multifocal complaints of neck, low back, shoulder, elbow, wrist, and arm pain. The applicant's medication list included Norco and AcipHex, it was reported. The applicant had undergone multiple shoulder and elbow surgeries, it was reported. The applicant did report a reduction in pain scores from 7-8/10 without medications to 4-6/10 with medications. It was acknowledged that activities as basic as standing, walking, bending, and lifting remained problematic. The applicant was "disabled," the treating provider acknowledged in the Social History section of the note. Norco was seemingly renewed while the applicant was seemingly kept off of work. The applicant had developed severe depressive symptoms, it was reported in another section of the note.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco 10/325mg, #90: Upheld

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

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, the treating provider reported on June 16, 2015. The applicant was "disabled," the treating provider reported in the Social History section of the note. While the treating provider did recount a reported reduction in pain scores from 7-8/10 without medications versus 4-6/10 with medications, these reports were, however, outweighed by the applicant's failure to return to work, the applicant's continued difficulty to perform activities as basic as standing, walking, bending, and lifting, despite ongoing opioid usage, and the attending provider's failure 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.