

Case Number:	CM15-0026367		
Date Assigned:	02/18/2015	Date of Injury:	04/01/2011
Decision Date:	04/17/2015	UR Denial Date:	02/03/2015
Priority:	Standard	Application Received:	02/11/2015

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: California

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Pain Management

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 injured worker is a 55-year-old male, who sustained an industrial injury on 4/1/2011. He reported that he developed right knee pain after he hit his right knee against the fare box of a bus. The diagnoses have included knee pain and localized primary osteoarthritis of lower leg. Treatment to date has included a cortisone injection to the right knee and medication. According to the progress report dated 1/14/2015, the injured worker complained of right knee pain. He rated his pain with medications as 5/10; he rated his pain without medications as 8/10. Quality of sleep was poor. Current medications included Vicodin ES and Naproxen. The injured worker received a Supartz intra-articular injection to the right knee at the office visit. Physical exam revealed an antalgic gait. Exam of the right knee revealed tenderness to palpation over the medial joint line and patella. There was mild effusion in the right knee joint. Exam of the left knee revealed tenderness to palpation over the medial joint line and patella; there was mild effusion in the left knee joint. It was noted that a urine drug screen from 11/17/2014 was appropriate. The treatment plan was to continue Vicodin four times a day.

IMR ISSUES, DECISIONS AND RATIONALES

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

Vicodin ES 7.5-300 mg tab #120: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 75-80.

Decision rationale: With regard to this request, the California Chronic Pain Medical Treatment Guidelines state the following about on-going management with opioids: "Four domains have been proposed as most relevant for ongoing monitoring of chronic pain patients on opioids: pain relief, side effects, physical and psychosocial functioning, and the occurrence of any potentially aberrant (or non-adherent) drug-related behaviors. These domains have been summarized as the '4 A's' (analgesia, activities of daily living, adverse side effects, and aberrant drug-taking behaviors). The monitoring of these outcomes over time should affect therapeutic decisions and provide a framework for documentation of the clinical use of these controlled drugs." Guidelines further recommend discontinuing opioids if there is no documentation of improvement in function and reduction in pain. In the progress reports available for review, the requesting provider did adequately document monitoring of the four domains. Improvement in function was clearly outlined in terms of being able to walk up to 20 minutes with medications and not being able to walk that long without. Pain score reduction was noted. No side effects were noted to medications in a progress note from 1/14/15. Prior urine drug testing on 11/17/14 was noted to be consistent with prescribed medications. Given these factors, it is appropriate to continue Vicodin ES. It can be suggested that the provider may trial a wean at some time, but this should not be grounds for denial as the worker takes this medication on a prn basis up to 3-4 times per day and can be given instruction to try to take less and assess if functional declines results.