

Case Number:	CM15-0049107		
Date Assigned:	03/23/2015	Date of Injury:	01/01/2002
Decision Date:	05/01/2015	UR Denial Date:	03/03/2015
Priority:	Standard	Application Received:	03/16/2015

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

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This 50-year-old woman sustained an industrial injury on 1/1/2002. The mechanism of injury is not detailed. Diagnoses include lumbago and post-laminectomy syndrome. Treatment has included oral and topical medications, home exercise regimen, TENS unit, and surgical intervention. Physician notes dated 2/9/2015 show complaints of low back pain rated 5/10. Recommendations include continuing Norco and Neurontin and home exercise program while awaiting physical therapy.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco 10/325mg #120 with 1 refill: 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): 74-94.

Decision rationale: The patient presents with lock pain. The current request is for Norco 10/325mg #120 with 1 refill. The treating physician states, "Patient is status post lumbar fusion

L5-S1 (2007). The patient reports she continues to work 30 hours/week. She is sleeping better. Her current pain level today is a 5/10 and she reports she has been averaging an 8/10. She notes that an 8/10 level of pain will decrease to a 6/10. The patient has been able to wean down off much of her medication. She is currently still able to work at the current dose of medication, although her overall pain is higher. She is relying more on her current home exercise program and has increased stretching activities. Recommendation to continue Norco. She continues to benefit from medications, displays no evidence of aberrant behavior and is using medications appropriately. She has tolerated a weaning of a large portion of her medication and is doing well with the current dosing. The medication does decrease her pain by 20% and her functionality is evidenced by her continued ability to work." (A.20/21) For chronic opiate use, MTUS guidelines page 78 require documentation of the four A's (Analgesia, ADL's, Adverse side effects, Adverse drug seeking behavior), and "pain assessment" that include current pain level, average pain, least pain, time it takes for medication to be effective and duration of relief with medication. MTUS guidelines pages 88 and 89 also states: "Document pain and functional improvement and compare to baseline... Pain should be assessed at each visit, and functioning should be measured at 6-month intervals using a numerical scale or validated instrument." In this case, the treating physician does document a decrease in pain levels and an increased functionality while on this medication. There is also documentation that the patient does not have any adverse effects or behaviors due to the medication. The current request is medically necessary and the recommendation is for authorization.