MAXIMUS Federal Services

Case Number:	CM15-0050593		
Date Assigned:	03/24/2015	Date of Injury:	08/18/2012
Decision Date:	05/05/2015	UR Denial Date:	02/21/2015
Priority:	Standard	Application Received:	03/17/2015

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 50-year-old who has filed a claim for chronic low back pain reportedly associated with an industrial injury of August 18, 2012. In a Utilization Review report dated February 21, 2015, the claims administrator failed to approve a request for Norco. An RFA form received on February 12, 2015 was referenced in the determination. The applicant's attorney subsequently appealed. On September 15, 2014, the applicant reported ongoing complaints of low back pain with ancillary complaints of shoulder pain, hip pain and leg pain, 5/10 without medications versus 9/10 with medications. Activities of daily living such as sitting, standing, bending, twisting remain problematic, however, the treating provider reported. The applicant was not working with a rather proscriptive 10-pound lifting limitation in place, the attending provider acknowledged. Topical compounded medications, Norco and oral diclofenac were endorsed. On January 21, 2015, the applicant was again described as not working. 5-6/10 pain with medications versus 8/10 pain without medications was reported. The applicant was using Norco, Flexeril, and diclofenac for pain relief. The same, unchanged, 10-pound lifting limitation was renewed on this occasion, seemingly resulting in the applicant's removal from the workplace.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco 10/325mg #90 1 tab by mouth every 6-8 hours as needed for pain: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines 7) When to Continue Opioids Page(s): 80.

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, it was acknowledged on multiple progress notes of late 2014 and early 2015, referenced above. While the attending provider did report some reduction in pain scores reportedly achieved as a result of ongoing medication consumption, these were, however, outweighed by the applicant's failure to return to work, and the attending provider's failure to outline any meaningful or material improvements in function effected as a result of ongoing opioid therapy. The attending provider's commentary to the effect that the applicant was still having difficulty performing activities of daily living as basic as sitting, standing, bending, and walking, coupled with the applicant's failure to return to work, did not make the compelling case for continuation of Norco. Therefore, the request was not medically necessary.