

Case Number:	CM15-0054468		
Date Assigned:	03/27/2015	Date of Injury:	11/19/2007
Decision Date:	05/01/2015	UR Denial Date:	03/13/2015
Priority:	Standard	Application Received:	03/23/2015

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 51-year-old [REDACTED] beneficiary who has filed a claim for chronic foot and ankle pain reportedly associated with an industrial injury of November 19, 2007. In a Utilization Review report dated March 13, 2015, the claims administrator failed to approve a request for Norco. The claims administrator referenced a progress note of March 4, 2015 in its determination. The claims administrator seemingly contended that the applicant has failed to profit with ongoing medication consumption. The applicant's attorney subsequently appealed. In a December 3, 2014 progress note, the applicant reported ongoing complaints of right lower extremity pain reportedly associated with complex regional pain syndrome (CRPS). Norco, Relafen, Ambien, Lyrica, and a urine drug screen were endorsed. It was stated that the applicant was using Norco four times daily. 9/10 pain without medications versus 5/10 pain with medications was reported. The attending provider posited that the applicant's ability to perform activities of personal hygiene, self-care, and cooking were ameliorated because of ongoing medication consumption. Permanent work restrictions were renewed. It did not appear that the applicant was working with previously imposed permanent limitations in place. In a January 27, 2015 progress note, the applicant reported ongoing complaints of low back pain radiating to the leg. The applicant was still using Norco at a rate of four times daily. Relafen, Ambien, and Lyrica were also apparently endorsed. The attending provider stated that the applicant's pain medications were keeping her out of the Emergency Department. In an appeal letter dated February 19, 2015, the attending provider maintained that the applicant was profiting to some extent from medication consumption, noting that the

applicant's ability to perform activities of self-care, personal hygiene, and shower were reportedly ameliorated because of ongoing medication consumption. It was suggested that the applicant would be non-ambulatory without her medications.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective request for one prescription of Norco 10/325mg #240: 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 because of the same. Here, however, the applicant was no longer working following imposition of permanent work restrictions; it was suggested on multiple progress notes, referenced above. While the attending provider did recount some reported reduction in pain scores affected because of ongoing medication consumption, these were however, outweighed by the applicant's seeming failure to return to work and the attending provider's failure to outline any meaningful or material improvements in function effected because of ongoing Norco usage. The attending provider's commentary to the effect that the applicant's ability to perform activities of daily living such as self-care, personal hygiene, and showering as a result of ongoing medication consumption did not, in and of itself, constitute evidence of a meaningful or material improvement in function effected as a result of the same. Therefore, the request was not medically necessary.