

Case Number:	CM15-0057181		
Date Assigned:	04/02/2015	Date of Injury:	02/20/2008
Decision Date:	05/05/2015	UR Denial Date:	03/09/2015
Priority:	Standard	Application Received:	03/25/2015

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 49-year-old who has filed a claim for chronic low back pain (LBP) reportedly associated with an industrial injury of February 20, 2008. In a Utilization Review report dated March 9, 2015, the claims administrator failed to approve a request for Ultracet. A prescription dated February 11, 2015 was referenced in the determination. The claims administrator did, somewhat incongruously, approve requests for Remeron and Neurontin. The applicant's attorney subsequently appealed. In a medical-legal evaluation dated January 26, 2015, it was acknowledged that the applicant had multifocal pain complaints, including chronic low back pain. The applicant had developed issues with depression. The applicant was off work, the medical-legal evaluator acknowledged. The applicant's current global assessment of function (GAF) was 65, the medical-legal evaluator reported. It was stated that the applicant developed significant issues with difficulty secondary to chronic pain issues. The medical-legal evaluator referenced historical "progress note" suggesting that the applicant had been using Norco, Relafen and Ultracet for a span of several years. The claims administrator's medical evidence log suggested that the information on file compromised largely of historical medical-legal evaluations as opposed to clinical progress notes.

IMR ISSUES, DECISIONS AND RATIONALES

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

Ultracet 37.5/325 MG #60 RX Date 2/11/15: Upheld

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

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

Decision rationale: No, the request for Ultracet, a synthetic 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, on total temporary disability despite ongoing Ultracet usage for what appeared to have been a minimum of several years, the applicant's medical-legal evaluator reported. The medical-legal evaluator failed to identify any meaningful, material improvements in function and/or quantifiable decrements in pain (if any) effected as a result of ongoing Ultracet usage. The information on file, it is further noted, compromised largely of historical medical-legal evaluations. The February 11, 2015 progress note and a prescription form in which the article in question was renewed were seemingly not incorporated into the independent medical review packet. The information on file, however, failed to support or substantiates the request. Therefore, the request was not medically necessary.