

<b>Case Number:</b>	CM14-0127222		
<b>Date Assigned:</b>	08/13/2014	<b>Date of Injury:</b>	11/04/2010
<b>Decision Date:</b>	10/23/2014	<b>UR Denial Date:</b>	07/18/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/11/2014

### 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. The expert reviewer is Board Certified in Occupational Medicine; hand is licensed to practice in California. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

### 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 [REDACTED] employee who has filed a claim for chronic low back pain reportedly associated with an industrial injury of November 4, 2010. Thus far, the applicant has been treated with the following: Analgesic medications; opioid therapy; unspecified amounts of physical therapy; earlier lumbar fusion surgery; epidural steroid injection therapy; the applicant was given refills of Norco and Zanaflex. The attending provider suggested that the applicant obtained a medical marijuana card. In Utilization Review Report dated July 18, 2014, the claims administrator denied a request for Norco and baclofen. The claims administrator did allude to the applicants having had a urine drug screen positive for marijuana. The applicant's attorney subsequently appealed. In a January 15, 2014, progress note, the applicant was described as having persistent complains of low back pain, 7/10. The applicant was using Norco and Zanaflex. The applicant has apparently had drug testing of September 2013 positive for marijuana, it was acknowledged. The applicant apparently underwent L5-S1 lumbar fusion surgery on April 19, 2014. The applicant was incidentally described as diabetic on that date. In a June 27, 2014, progress note, the applicant again presented with persistent complaints of low back pain radiating to the left leg. The applicant did have comorbid asthma, hypertension, diabetes and dyslipidemia, it was stated. The applicant was using Neurontin, Morphine, and baclofen, it was stated in one section of the report. It was stated that the applicant had had a December 2013 drug test, which was positive for marijuana. The applicant stated that Morphine was making her nauseated and that Norco was causing her gums to bleed. The applicant's renal and hepatic function were reportedly normal, it was stated. Norco and baclofen were renewed. The applicant was asked to taper off of Neurontin and stop Morphine and Zanaflex. The applicant's work status was not provided. The attending provider again asked the applicant to obtain a medical marijuana card.

## IMR ISSUES, DECISIONS AND RATIONALES

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

**Norco 10/325mg # 150:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines When to Discontinue Opioids topic. When to Continue Opioids topic. Page(s): 79, 80.

**Decision rationale:** 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. In this case, however, the applicant is seemingly off of work. The attending provider has failed to outline the applicant's work status in several recent office visits, referenced above. The attending provider has likewise failed to document any decrements in pain or outline any material improvements in function achieved as result of ongoing opioid therapy, including ongoing Norco therapy. The applicant is consistently described as reporting 7/10 pain, despite ongoing Norco usage. The applicant is apparently having difficulty performing activities as basic as standing and walking, the attending provider further noted on June 27, 2014, progress note. It is further noted that page 79 of the MTUS Chronic Pain Medical Treatment Guidelines recommends immediate discontinuation of opioids in applicants using illicit drugs here. The applicant is, in fact, using marijuana, an illicit drug. For all of the stated reasons, then, discontinuing Norco appears to be a more appropriate option than continuing Norco, given (a) the applicant's failure to respond favorably to same and (b) the applicant's concurrent usage of marijuana, an illicit drug. Accordingly, the request is not medically necessary.

**Baclofen 10mg # 60:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Baclofen section MTUS 9792.20f. Page(s): 64, 7.

**Decision rationale:** While 64 of the MTUS Chronic Pain Medical Treatment Guidelines does acknowledge that baclofen is FDA approved in management of spasticity and is recommended only for the treatment of spasticity associated with multiple sclerosis and/or spinal cord injuries and can be employed off label for neuropathic pain, this recommendation is qualified by commentary on page 7 of the MTUS Chronic Pain Medical Treatment Guidelines to the effect that an attending provider should incorporate some discussion of medication efficacy into his choice of recommendations. In this case, however, the applicant is seemingly off of work. The applicant continues to report 7/10 pain. Ongoing usage of baclofen has failed to curtail the applicant's dependence on opioid agents such as Norco and Morphine and/or illicit substances

such as marijuana. All of the above, taken together, suggests a lack of functional improvement as defined in MTUS 9792.20f, despite ongoing baclofen usage. Therefore, the request is not medically necessary.