

Case Number:	CM14-0165369		
Date Assigned:	10/10/2014	Date of Injury:	03/31/2012
Decision Date:	11/12/2014	UR Denial Date:	09/26/2014
Priority:	Standard	Application Received:	10/07/2014

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 Physical Medicine & Rehabilitation and 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:

This 36 year-old patient sustained an injury on 3/31/12 from squatting to fill bread onto a rack while employed by [REDACTED]. Request(s) under consideration include Norco 10/325mg #60. Diagnoses include post-traumatic left knee arthrosis with neuroma of lateral cutaneous nerve s/p arthroscopy with lateral meniscectomy on 9/7/12. Report of 9/4/14 from the provider noted the patient with complaints of pain, clicking, and posing with swelling and giving way on the left knee. Exam showed left knee with well-healed portals; mild tenderness on palpation over the anterolateral knee; range of 0-120 degrees; positive McMurray's; no gross instability noted; negative Apley's and drawer tests; with motor strength 5/5, DTRs 2+, and sensation intact in bilateral lower extremities. X-rays showed slight flattening of lateral tibial plateau with slight loss of joint space. Treatment included MR arthrogram, nerve block injection of cutaneous nerve. The request(s) for Norco 10/325mg #60 was denied on 9/26/14 citing guidelines criteria and lack of medical necessity.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco 10/325mg #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 74-75, 86-87.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines page(s) 74-96, On-Going Management- Actions Should Include: (a) Prescriptions from a single prac.

Decision rationale: Per the MTUS Guidelines cited, opioid use in the setting of chronic, non-malignant, or neuropathic pain is controversial. Patients on opioids should be routinely monitored for signs of impairment and use of opioids in patients with chronic pain should be reserved for those with improved functional outcomes attributable to their use, in the context of an overall approach to pain management that also includes non-opioid analgesics, adjuvant therapies, psychological support, and active treatments (e.g., exercise). Submitted documents show no evidence that the treating physician is prescribing opioids in accordance to change in pain relief, functional goals with demonstrated improvement in daily activities, decreased in medical utilization or change in work status. There is no evidence presented of random drug testing or utilization of pain contract to adequately monitor for narcotic safety, efficacy, and compliance. The MTUS provides requirements of the treating physician to assess and document for functional improvement with treatment intervention and maintenance of function that would otherwise deteriorate if not supported. From the submitted reports, there is no demonstrated evidence of specific functional benefit derived from the continuing use of opioids with persistent severe pain. The Norco 10/325mg #60 is not medically necessary and appropriate.