

Case Number:	CM15-0113134		
Date Assigned:	06/19/2015	Date of Injury:	08/25/2009
Decision Date:	07/22/2015	UR Denial Date:	06/03/2015
Priority:	Standard	Application Received:	06/11/2015

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 47-year-old who has filed a claim for chronic low back and bilateral knee pain reportedly associated with an industrial injury of August 25, 2009. In a Utilization Review report dated June 3, 2015, the claims administrator failed to approve a request for Norco. The claims administrator referenced a May 27, 2015 RFA form in its determination, along with a progress note dated May 16, 2015. The applicant's attorney subsequently appealed. In a handwritten PR-2 form dated May 26, 2015, it was stated that the applicant would remain off of work permanently. In a RFA form dated June 2, 2015, Norco was renewed. In an associated progress note of May 26, 2015, the applicant reported ongoing complaints of low back, knee and shoulder pain. Norco was renewed. The applicant was using Norco at a rate of six to eight times daily, it was reported. The attending provider suggested that the applicant was using Norco in excess of prescribed amounts. The applicant was severely obese, with BMI of 38. Little-to-no discussion of medication efficacy transpired.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 prescription for Hydrocodone/Acetaminophen 10/325mg #240: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids, criteria for use; Opioids for chronic pain; Opioids, specific drug list, Hydrocodone/Acetaminophen.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines 7) When to Continue Opioids; 6) When to Discontinue Opioids Page(s): 80; 79.

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 a work status report of May 26, 2015. On that date, it was stated that the applicant would remain off of work, on a permanent basis. An associated progress note of the same date suggested that the applicant was overusing Norco and/or employing Norco in excess of prescribed amounts. The attending provider did not identify quantifiable decrements in pain or meaningful, material improvements in function effected as a result of ongoing Norco usage on that date. Page 79 of the MTUS Chronic Pain Medical Treatment Guidelines also stipulates that repeated violations from a medication contract do represent grounds to discontinue opioid therapy. Here, it did not appear that the applicant had profited from ongoing Norco usage. The attending provider's documentation of progress note of May 26, 2015, furthermore, suggested that discontinuing opioid therapy with Norco was a more appropriate option than continuing the same. Therefore, the request was not medically necessary.