

Case Number:	CM15-0113456		
Date Assigned:	06/19/2015	Date of Injury:	05/21/2001
Decision Date:	07/24/2015	UR Denial Date:	06/08/2015
Priority:	Standard	Application Received:	06/12/2015

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 65-year-old who has filed a claim for chronic low back, hip, and leg pain reportedly associated with an industrial injury of May 21, 2001. In a Utilization Review report dated June 8, 2015, the claims administrator failed to approve a request for Norco. An RFA form of May 22, 2015, an associated progress note of May 1, 2015, and a letter dated June 4, 2015 were referenced in the determination. The applicant's attorney subsequently appealed. On April 23, 2015, the applicant reported ongoing complaints of low back and left leg pain. The applicant was severely obese, with BMI of 41, it was reported. Norco was renewed. The applicant had various comorbidities, including diabetes, dyslipidemia, and mild COPD, it was suggested. The applicant's work status was not outlined. The attending provider stated that the applicant's usage of Norco was permitting activities of daily living but did not elaborate as to what these activities were. On June 4, 2015, the applicant reported 10/10 pain without medications. The applicant had been using Norco since 2005, it was reported. The treating provider acknowledged that the applicant was not working. 10/10 pain without medications versus 7/10 with medications was reported. The attending provider stated that the applicant's medications were allowing him to go to the store of his own accord. The attending provider acknowledged that the applicant was nevertheless unable to do any kind of lifting owing to heightened pain complaints. The applicant was again described as severely obese, with a BMI of 41.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco 7.5/325mg #60 with 1 refill: 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 as a result of the same. Here, however, the applicant was off of work, it was acknowledged on June 4, 2015. While the attending provider did recount some reported reduction in pain scores from 10/10 without medications to 7/10 with medications, these reports were, however, outweighed by the applicant's failure to return to work and the attending provider's failure to outline meaningful or material improvements in function effected as a result of ongoing opioid usage. The attending provider's commentary to the effect that the applicant's ability to go to the store had been ameliorated as a result of medication consumption did not, in and of itself, constitute evidence of a meaningful, material, or substantive improvement in function effected as a result of ongoing Norco usage and was, moreover, outweighed by the applicant's failure to return to work and the applicant's reports to the effect that he was unable to do any kind of lifting whatsoever. Therefore, the request was not medically necessary.