MAXIMUS Federal Services

Case Number:	CM15-0127704		
Date Assigned:	07/14/2015	Date of Injury:	10/29/2009
Decision Date:	08/13/2015	UR Denial Date:	06/04/2015
Priority:	Standard	Application Received:	07/01/2015

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 28-year-old who has filed a claim for chronic low back and neck pain reportedly associated with an industrial injury of October 29, 2009. In a Utilization Review report dated June 3, 2015, the claims administrator failed to approve a request for Norco. A partial approval or weaning or tapering purpose was apparently issued. The claims administrator referenced an RFA form received on May 27, 2015 and an associated progress note of the same date in its determination. The applicant's attorney subsequently appealed. On January 7, 2015, the applicant was placed off of work, on total temporary disability, owing to ongoing complaints of back, neck, and leg pain with derivative complaints of depression and anxiety. The note was handwritten, difficult to follow, did not seemingly incorporate any discussion of medication efficacy. On April 23, 2015, the applicant reported ongoing complaints of neck and low back pain radiating into the bilateral upper and bilateral lower extremities. The applicant stated that previous epidural steroid injections had proven unsuccessful. The applicant was on Norco, Xanax, unspecified pain medicines, and Zofran, it was reported. The applicant was described as remaining highly symptomatic despite extended usage of opioid analgesics. No seeming discussion of medication efficacy transpired on this date, either.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco 10/325mg #120: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 74-95, 124.

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 suggested on various dates, including on February 4, 2015 and on April 22, 2015. On April 22, 2015, the attending provider acknowledged that the applicant had last worked in 2010. The applicant was having difficulty with activities of daily living as basic as standing, walking, and bending, the attending provider reported on that date. The attending provider also reported that the applicant remained highly symptomatic as of April 22, 2015, despite ongoing Norco usage. All of the foregoing, taken together, did not make a compelling case for continuation of opioid therapy with Norco. Therefore, the request was not medically necessary.