

Case Number:	CM15-0128322		
Date Assigned:	08/07/2015	Date of Injury:	02/16/2013
Decision Date:	09/25/2015	UR Denial Date:	06/24/2015
Priority:	Standard	Application Received:	07/03/2015

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: California

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Pain Management, 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 injured worker is a 50-year-old female, who sustained an industrial injury on 2-16-13. The injured worker was diagnosed as having cervical spine disc bulge, musculogamentous strain of lumbar spine, shoulder pain, labral tear-slap lesion and supraspinatus tear. Treatment to date has included right shoulder arthroscopy with subacromial decompression, physical therapy, home exercise program and medications including Ultram, Flexeril, Motrin and Protonix. (MRI) magnetic resonance imaging of right shoulder performed on 12-12-13 revealed joint effusion, anterior and posterior capsulitis and sprain, increased signal in supraspinatus tendon consistent with a tear and increased signal traversing the anterior labrum consistent with a tear. (MRI) magnetic resonance imaging of cervical spine performed on 12-12-13 revealed levoscoliosis, straightening of the cervical spine, anterolisthesis at C6-7 and disc abnormalities. Currently on 5-29-15, the injured worker complains of burning pain across knee and kneecap with crepitus and popping, pain with limited range of motion of right shoulder and pain and spasm of neck and low back. She is temporarily totally disabled. Physical exam performed on 5-29-15 revealed spasm with tenderness to palpation of right side of neck, tenderness over the acromial joint of right shoulder with moderate effusion and crepitus, spasm of lower lumbar region with point tenderness with palpation and painful range of motion. The treatment plan included 12 additional sessions of physical therapy and prescriptions for Flexeril 7.5mg, Ultram 50mg and Ultram ER 150mg.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norco 10/325mg #60: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Hydrocodone/Acetaminophen, Opioids, Weaning of Medications.

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

Decision rationale: MTUS 2009 states that opioids should be discontinued if there is no functional improvement attributable to their use when treating non-cancer pain. This patient underwent shoulder surgery in December 2014 and 7 months later continues with decreased shoulder range of motion, incisional pain and AC joint pain. Norco does not provide any improved functional use of the right shoulder and therefore its use does not strictly adhere to MTUS 2009. However, the patient has not fully recovered from surgery since range of motion continues to be limited and there is incisional pain. Therefore, use of Norco in this setting is palliative but due to continued pain from the surgery over 7 months ago. The MED is 20. This request for #60 of Norco is medically necessary due to the ongoing post surgical pain.