

<b>Case Number:</b>	CM15-0171935		
<b>Date Assigned:</b>	09/14/2015	<b>Date of Injury:</b>	01/25/2001
<b>Decision Date:</b>	10/20/2015	<b>UR Denial Date:</b>	08/21/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/01/2015

### 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: California  
 Certification(s)/Specialty: Emergency 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 49 year old male who sustained an industrial injury on 01-25-2001. Current diagnoses include status post lumbar removal of hardware and exploration of fusion on 07-07-2015, status post L3-4 decompression and fusion on 03-07-2013, status post anterior-posterior lumbar fusion L4-S1 on 01-29-2004, status post removal of lumbar hardware. Report dated 07-20-2015 noted that the injured worker presented for a two-week post op appointment following hardware removal on 07-07-2015. Physical examination was positive a healed surgical incision, motor strength is normal in bilateral lower extremities, intact sensation, and all toes are warm and perfused. Previous treatments included medications, surgical interventions, medial branch blocks, and hardware removal on 07-07-2015. The treatment plan included a request for an evaluation with a pain management doctor to help him with the pain and wean him off narcotics. The injured worker is temporarily totally disabled. The injured worker has been prescribed Norco and Xanax since at least 03-05-2015. The utilization review dated 08-21-2015, modified the request for Norco and Xanax.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Norco 10/325mg #180:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Opioids, criteria for use, Opioids for chronic pain, Opioids, long-term assessment.

**Decision rationale:** Norco is acetaminophen and hydrocodone, an opioid. Patient has chronically been on an opioid pain medication. As per MTUS Chronic pain guidelines, documentation requires appropriate documentation of analgesia, activity of daily living, adverse events and aberrant behavior. Documentation fails criteria. Not a single component has been documented in last few progress notes. There is no documentation of any objective improvement in pain or function. There is no documentation of screening for abuse or side effects. Norco is not medically necessary.

**Xanax 0.5mg #60:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Benzodiazepines.

**Decision rationale:** Xanax is a benzodiazepine. As per MTUS Chronic pain guidelines is not recommended for long-term use. There is strong risk of dependence and tolerance develops rapidly. Review of records show that patient is chronically on this medication. The number of tablets are not appropriate for intermittent use but chronic persistent use. Xanax is not medically necessary.