

Case Number:	CM15-0179774		
Date Assigned:	09/21/2015	Date of Injury:	08/10/2013
Decision Date:	10/30/2015	UR Denial Date:	09/02/2015
Priority:	Standard	Application Received:	09/11/2015

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 [REDACTED] who has filed a claim for chronic shoulder and mid back pain reportedly associated with an industrial injury of August 10, 2013. In a Utilization Review report dated September 2, 2015, the claims administrator partially approved a request for tramadol. The applicant's attorney subsequently appealed. On August 2, 2015, the applicant reported ongoing complaints of shoulder pain. The attending provider contented that the applicant was responding favorably to a medication regimen compromising of Relafen, tramadol, tizanidine, and Voltaren gel. The applicant was given diagnosis of shoulder pain, myofascial pain, and upper back pain. A Kenalog injection was endorsed while multiple medications were renewed, continued, and/or dispensed. The applicant was given a rather proscriptive 10-pound lifting limitation. It was not clearly stated whether the applicant was or was not working with said limitations in place. In an appeal letter dated August 18, 2015, the attending provider appealed previously denied tramadol, contenting the tramadol had reduced the applicant's pain scores from 9/10 without medications to 7/10 with medications. The attending provider contented that tramadol was ameliorating the applicant's ability to perform personal hygiene and household chores in unspecified amounts. In an earlier progress note dated June 30, 2015, the applicant's shoulder surgeon imposed a more permissive 25-pound lifting limitation. Once again, however, it was not clearly stated whether the applicant was or was not working with said limitation in place.

IMR ISSUES, DECISIONS AND RATIONALES

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

Tramadol 50 mg Qty 30 with 2 refills: 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.

Decision rationale: No, the request for tramadol, a synthetic 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, improve functioning, and/or reduced pain achieved as a result of the same. Here, the attending provider did not clearly state whether the applicant was or was not working with a rather proscriptive 10-pound lifting limitation in place as of August 24, 2015, although this did not appear to be the case. While the attending provider's appeal letter of August 18, 2015 did recount a low-grade reduction in pain scores from 9/10 without medications and 10/10 with medications, these reports were, however, outweighed by the attending provider's failure to recount the applicant's work status, the applicant's seeming failure to return to work, and the attending provider's failure to outline meaningful, material, and/or substantive improvements in function (if any) effected as a result of ongoing tramadol usage. The attending provider's commentary to the fact that the applicant's ability to perform personal hygiene in unspecified amounts as a result of ongoing medication consumption did not constitute evidence of a meaningful benefit achieved as a result of ongoing tramadol usage. Therefore, the request was not medically necessary.