

Case Number:	CM15-0027716		
Date Assigned:	02/20/2015	Date of Injury:	06/14/2013
Decision Date:	04/03/2015	UR Denial Date:	01/23/2015
Priority:	Standard	Application Received:	02/13/2015

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: New Jersey
 Certification(s)/Specialty: Family Practice

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 51 year old male who sustained an industrial injury on June 14, 2013. He has reported severe back pain, mid back pain, and bilateral shoulder pain and has been diagnosed with lumbar disc protrusions, lumbar radiculitis, bilateral shoulder impingement syndrome, and thoracic spine myoligamentous sprain/strain. Treatment has included physical therapy, lumbar epidural injections, and medications. Currently the injured worker complains of tenderness in the upper trapezius region. There was pain with palpation of the subacromial bursa and sub deltoid bursa bilaterally. There is moderate tenderness in the lumbar paravertebral muscles. The treatment plan included medications, pain management, and injections. On January 23, 2015 Utilization Review non certified 1 CT scan of the lumbar spine, 90 norco 10/325, 1 urine toxicology screening, and 1 weight loss program citing the MTUS, ACOEM, and Official Disability Guidelines.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 CT Scan of the lumbar spine: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 59.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 296-310.

Decision rationale: MTUS Guidelines for diagnostic considerations related to lower back pain or injury require that for any special imaging study to be warranted there needs to be unequivocal objective clinical findings that suggest red flag diagnoses (cauda equina, infection, fracture, tumor, dissecting/ruptured aneurysm, etc.), and only in those patients who would consider surgery as an option to correct it. In non-emergent situations, a failure of conservative treatments for at least 4-6 weeks is required before considering any imaging. In some situations where the patient has had prior surgery on the back where the physician is looking for stability of a fusion surgery, for example, or there is a suspected bony abnormality such as fracture, CT scan may be considered. In the case of this worker, the indication for ordering a CT scan, based on the documentation, was to confirm facet arthritis on a different imaging technique besides MRI, which had already been completed. This isn't sufficient of a reason to warrant a CT scan, and no other valid indication was seen as applying in this case. The MRI study and physical findings point to facet arthropathy, albeit mild, and further imaging will not likely change the treatment options for this worker. Therefore, the CT scan of the lumbar spine is medically unnecessary.

90 Norco 10/325mg: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 78-96.

Decision rationale: The MTUS Chronic Pain Medical Treatment Guidelines state that opioids may be considered for moderate to severe chronic pain as a secondary treatment, but require that for continued opioid use, there is to be ongoing review and documentation of pain relief, functional status, appropriate medication use with implementation of a signed opioid contract, drug screening (when appropriate), review of non-opioid means of pain control, using the lowest possible dose, making sure prescriptions are from a single practitioner and pharmacy, and side effects, as well as consultation with pain specialist if after 3 months unsuccessful with opioid use, all in order to improve function as criteria necessary to support the medical necessity of opioids. Long-term use and continuation of opioids requires this comprehensive review with documentation to justify continuation. In the case of this worker, there was insufficient evidence found in the notes provided for review that this full review regarding Norco use was completed. In particular, the Norco's effect on the worker's overall function and pain level was not documented enough to convince the reviewer that it was benefiting the worker significantly. Therefore, the Norco will be considered medically unnecessary. Weaning may be indicated.

1 Urine toxicology screening: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Urine Drug Testing (UDT).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug testing p 43, AND Opioids pp. 77, 78, 86.

Decision rationale: The MTUS Chronic Pain Guidelines state that urine drug screening tests may be used to assess for the use or the presence of illegal drugs. Drug screens, according to the MTUS, are appropriate when initiating opioids for the first time, and afterwards periodically in patients with issues of abuse, addiction, or poor pain control. The MTUS lists behaviors and factors that could be used as indicators for drug testing, and they include: multiple unsanctioned escalations in dose, lost or stolen medication, frequent visits to the pain center or emergency room, family members expressing concern about the patient's use of opioids, excessive numbers of calls to the clinic, family history of substance abuse, past problems with drugs and alcohol, history of legal problems, higher required dose of opioids for pain, dependence on cigarettes, psychiatric treatment history, multiple car accidents, and reporting fewer adverse symptoms from opioids. According to the notes in this case, the worker exhibited some risk factors for a heightened risk of abuse of his medications, and was recommended a urine drug screening. In the case of this worker, although the Norco was not found to be medically necessary (based on lack of supportive documentation) the urine drug screening at the time of the request was at a time when he was using Norco, and therefore, is appropriate and medically necessary.

1 weight loss program: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Diabetes section, Lifestyle modifications.

Decision rationale: The MTUS is silent regarding weight loss programs. The ODG, however, states that lifestyle modifications such as dietary changes and exercise are particularly recommended as first-line interventions for the treatment of diabetes and obesity. The low-glycemic-index diet is best for weight loss and cardiovascular disease prevention. Extreme restriction of healthy whole food sources of fats or complex carbs can have bad effects, however. The best long-term approach is to avoid restriction of any major nutrient, either fat or carbohydrate, and instead focus on the quality of nutrients from whole foods, primarily plant-based. The argument that the food industry makes, that all foods can be part of a healthful diet as long as you watch calories, is misleading. Primary to considering any weight loss program, an attempt with individualized dietary and exercise advice by the provider should come first. In the case of this worker, who was recommended a "weight loss program", no specific program was recommended, and as they differ significantly between each other, it will be considered medically unnecessary until a specific program is requested to review.