

<b>Case Number:</b>	CM15-0042714		
<b>Date Assigned:</b>	03/12/2015	<b>Date of Injury:</b>	09/18/2014
<b>Decision Date:</b>	04/22/2015	<b>UR Denial Date:</b>	02/25/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/06/2015

### 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 56-year-old [REDACTED] beneficiary who has filed a claim for chronic low back pain reportedly associated with an industrial injury of September 18, 2014. In a utilization review report dated February 5, 2015, the claims administrator failed to approve a request for Norco. The claims administrator referenced a February 17, 2015 RFA form and associated February 10, 2015 progress note in its determination. The applicant's attorney subsequently appealed. On March 3, 2015, the attending provider appealed previously denied Norco. The applicant had ongoing complaints of pain ranging from 4/10 to 6/10, it was noted. The applicant's pain complaints were preventing him from doing yard work, socializing, household chores, and exercising, the treating provider acknowledged. Norco and a functional restoration program were endorsed. It was stated that the applicant's pain scores had dropped from 9/10 without medications to 5/10 with medications in one section of the note. The applicant's work status was not clearly stated, although the applicant did not appear to be working. In a February 10, 2015 progress note, the attending provider suggested that the applicant was not working as his employer was unable to accommodate previously suggested limitations.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Norco 10/325mg #60: Upheld**

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

**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, is 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 seemingly off of work as of the date of the request. While the attending provider did recount some reported reduction in pain scores imputed to ongoing medication consumption, including ongoing Norco consumption, these were, however, outweighed by the applicant's seeming failure to return to work and the attending provider has failed to outline any meaningful or material improvements in function effected as a result of ongoing Norco usage. The attending provider's commentary to the fact that the applicant was avoiding socializing, avoiding doing yard work, avoiding exercising, etc., did not make a compelling case for continuation of the same. Therefore, the request is not medically necessary.