

Case Number:	CM15-0063849		
Date Assigned:	04/09/2015	Date of Injury:	10/13/2009
Decision Date:	05/12/2015	UR Denial Date:	03/11/2015
Priority:	Standard	Application Received:	04/03/2015

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: 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 60-year-old who has filed a claim for chronic low back (LBP) with derivative complaints of depression and anxiety reportedly associated with an industrial injury of October 13, 2009. In a Utilization Review report dated March 11, 2015, the claims administrator failed to approve a request for Norco. The claims administrator referenced a progress note dated February 23, 2015 in its determination. The applicant's attorney subsequently appealed. In a progress note dated March 23, 2015, the applicant reported highly variable complaints of low back pain, ranging anywhere from 4-9/10. The applicant's current pain scores were 7/10. The applicant was using Norco and Morphine for pain relief. The applicant apparently protested frequent urine drug testing. The applicant was using a cane to move about. The applicant was on Wellbutrin, Norco, Morphine, Neurontin, estrogen, Prilosec, baclofen, Skelaxin, Klonopin, Zofran, and over-the-counter antacids. The applicant was given refills of Morphine and Norco. The attending provider stated that the applicant's pain scores were reduced and a result of medication consumption, but noted that the applicant was having difficulty performing activities of daily living as basic as toileting herself.

IMR ISSUES, DECISIONS AND RATIONALES

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

Prospective: Norco 10/325mg, #120: Upheld

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

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, 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, improved functioning, and/or reduced pain achieved as a result of the same. Here, the applicant was not seemingly working on March 23, 2015, the attending treating suggested, following imposition of permanent work restrictions. While the treating provider stated that the applicant's pain scores were reduced as a result of ongoing medication consumption, these reports were, however, outweighed by the applicant's seemingly failure to return to work and the attending provider's failure to outline any meaningful or material improvements in function effected as a result of the same. The applicant's commentary to the effect that she was having difficulty toileting herself and ambulating despite ongoing opioid consumption, coupled with her failure to return to work, did not make a compelling case for continuation of the same. Therefore, the request was not medically necessary.