

Case Number:	CM14-0151970		
Date Assigned:	09/22/2014	Date of Injury:	10/23/2012
Decision Date:	11/06/2014	UR Denial Date:	09/11/2014
Priority:	Standard	Application Received:	09/17/2014

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. The expert reviewer is Board Certified in Occupational Medicine and is licensed to practice in California. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

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] employee who has filed a claim for chronic low back pain reportedly associated with an industrial injury of October 23, 2012. Thus far, the applicant has been treated with the following: Analgesic medications; opioid therapy; reported diagnosis of herniated lumbar intervertebral disk with radiculopathy; and work restrictions. In a Utilization Review Report dated September 11, 2014, the claims administrator retrospectively denied a request for Norco. The claims administrator did not seemingly incorporate any guidelines into its rationale but suggested that the applicant was not profiting from ongoing usage of Norco. The applicant's attorney subsequently appealed. In an August 4, 2014 progress note, the applicant reported 7/10 pain without medications versus 5/10 pain with medications. The applicant had persistent complaints of low back pain and right leg pain, sometimes severe. Positive straight leg raise was noted. It was stated that the applicant's ability to stand and walk was reportedly ameliorate with ongoing medication consumption. In another section of the note, the applicant then reported 7/10 pain complaints x3 months, longstanding. A rather proscriptive 10- to 15 pound lifting limitation was endorsed, although it did not appear that the applicant was working with said limitations in place. In an earlier note dated May 15, 2014, the applicant again was given a rather proscriptive 10 to 15-pound lifting limitation. The attending provider stated that ongoing usage of gabapentin was beneficial but did not seemingly elaborate on the benefits the applicant was receiving with Norco.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 NORCO 10/325 MG TABLET, 1 TAB P.O., Q.I.D, #120 FOR 1 MONTH, FOR THE MANAGEMENT OF SYMPTOMS RELATED TO THE LUMBAR SPINE: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines When to Continue Opioids topic. Page(s): 80.

Decision rationale: 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. In this case, however, the applicant is seemingly off of work. A rather proscriptive 10 to 15-pound lifting limitation remains in place. The attending provider's comments to the effect that the applicant's ability to stand and walk has been ameliorated with ongoing medication consumption does not appear to be of significant benefit and is outweighed by the applicant's continued failure to return to work, the applicant, is unable to use his leg, and the continued complaints of pain at the 7/10 level, despite ongoing Norco usage. Therefore, the request is not medically necessary.