

Case Number:	CM13-0037077		
Date Assigned:	12/13/2013	Date of Injury:	02/05/2013
Decision Date:	05/20/2014	UR Denial Date:	10/14/2013
Priority:	Standard	Application Received:	10/22/2013

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 Physical Medicine & Rehabilitation 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 injured worker is a 49-year-old male who reported an injury on 02/05/2013. The mechanism of injury was not provided. The documentation of 08/26/2013 revealed the injured worker had developed a superficial wound infection and received Keflex. The injured worker was ready to attend physical therapy.

IMR ISSUES, DECISIONS AND RATIONALES

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

12 PANEL DRUG SCREEN: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 77-80, 94.

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

Decision rationale: The MTUS Chronic Pain Guidelines recommend urine drug screens for injured workers when there are documented issues of abuse, addiction, or poor pain control. There was a lack of documentation indicating the injured worker had issues of abuse, addiction, or poor pain control in the medical records provided for review. Given the above, the request for one 12 panel drug screen is not medically necessary and appropriate.