MAXIMUS Federal Services

Case Number:	CM13-0051730		
Date Assigned:	04/09/2014	Date of Injury:	04/05/2001
Decision Date:	05/13/2014	UR Denial Date:	11/05/2013
Priority:	Standard	Application Received:	11/14/2013

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, has a subspecialty in Interventional Spine 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:

This is a 58 year-old female with a 4/5/2001 industrial injury claim. She has been diagnosed with cervical degenerative disc disease; spondylosis; multilevel lumbar degenerative disc disease status post microscopic lumbar discectomy; bilateral carpal tunnel syndrome, status post carpal tunnel release; fibromyalgia; right knee dysfunction status post total knee replacement; and chronic pain syndrome. According to the 10/18/13 report from [redacted], the patient presents with 6-9/10 neck and back pain. The 10/30/13 pain management report from [redacted] states she has 6-7/10 pain, in both knees, neck and low back. She wears knee braces and walks with a cane. She has been using Duragesic 75mcg q4-8 hr; oxycodone IR 30mg tid; Lyrica Final Determination Letter for IMR Case Number CM13-0051730 3 150mg bid; Cymbalta 60mg qd, Senna tablets and Prilosec. On 11/5/13 UR denied a urine toxicology screen and labs.

IMR ISSUES, DECISIONS AND RATIONALES

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

URINE TOXICOLOGY SCREEN: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines OPIOIDS/DRUG TESTING.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug Testing Page(s): 43.

Decision rationale: The Expert Reviewerâ¿¿s decision rationale: The 10/30/13 pain management report from [redacted] states she has 6-7/10 pain, in both knees, neck and low back. She wears knee braces and walks with a cane. She has been using Duragesic 75mcg q4-8 hr; oxycodone IR 30mg tid; Lyrica 150mg bid; Cymbalta 60mg qd, Senna tablets and Prilosec. The urine drug screen from 9/24/13 was positive for the medications taken, but also detected amphetamines and methamphetamines. The patient appears to be above low risk for drug abuse. The request for drug testing is in accordance with MTUS guidelines.

LABORATORY WORKS: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG-TWC,(ONLINE EDITION), CHAPTER,DIABETES, FASTING BLOOD GLUCOSE TEST (FPG).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug Testing Page(s): 43.

Decision rationale: The Expert Reviewerâ¿¿s decision rationale: The 10/30/13 pain management report from [redacted] states she has 6-7/10 pain, in both knees, neck and low back. She wears knee braces and walks with a cane. She has been using Duragesic 75mcg q4-8 hr; oxycodone IR 30mg tid; Lyrica 150mg bid; Cymbalta 60mg qd, Senna tablets and Prilosec. The urine drug screen from 9/24/13 was positive for the medications taken, but also detected amphetamines and methamphetamines. The patient appears to be above low risk for drug abuse. The records show the â¿¿labworkâ¿ • was quantitative analysis The request for drug testing and associated labwork is in accordance with MTUS guidelines.