

Case Number:	CM13-0056328		
Date Assigned:	12/30/2013	Date of Injury:	12/07/2001
Decision Date:	03/26/2014	UR Denial Date:	11/04/2013
Priority:	Standard	Application Received:	11/22/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Internal 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 physician 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 53 year old male status post injury 12/7/01. On 9/17/13 he was status post revision right total hip arthroplasty, subjectively doing well for that stage of his recovery. His treatment has included medications of Fentanyl patch 100mcg, Percocet #90, Lidoderm patch, Cymbalta and Lyrica, conservative modalities, and surgery. He is under the care of [REDACTED], Anesthesiology / Pain Management. The patient has undergone urine drug testing to monitor adherence to prescribed treatment regimen, and was been found to be compliant. The diagnoses are status post posterior spinal fusion at L2-3 and L3-4 with residual postoperative pain (8/24/11), gastritis secondary to medication usage, chronic pain syndrome with severe breakthrough pain, chronic severe low back pain, neuropathic pain in the lower extremities, local neuropathic pain in the lumbar spine, bilateral sacroilitis, status post L5-S1 neurotomy, L5-S1 neurotomy, left total hip replacement (2/21/08), right hip decompression (2/21/08), right knee arthroscopy (Dec 2007), total disc replacement at L2-3, left knee arthroplasty (2006), bilateral knee osteoarthritis, anxiety and depression due to chronic pain syndrome and failed back surgery syndrome, left L3 and L4 arachnoiditis, left lower extremity acute radiculopathy, disc protrusion at L1-2 with L2 nerve impingement, chronic smoking dependency, left hip internal derangement, tobacco dependence, and chronic severe bilateral hip pain. The treatment requested is one (1) urinalysis drug screen preformed on 9/25/2013

IMR ISSUES, DECISIONS AND RATIONALES

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

Urinalysis drug screen: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Pain (Chronic)

MAXIMUS guideline: Decision based on MTUS ACOEM.

Decision rationale: The records reviewed indicated that the claimant is taking multiple medications with heavy opiates usage, and with the records presented, he underwent drug testing four times. Screening is recommended at baseline, randomly at least twice and up to 4 times a year and at termination. Screening should also be performed "for cause" (e.g., provider suspicion of substance misuse including over-sedating, drug intoxication, motor vehicle crash, other accidents and injuries, driving while intoxicated, premature prescription renewals, self-directed dose changes, lost or stolen prescriptions, using more than one provider for prescriptions, non-pain use of medication, using alcohol for pain treatment or excessive alcohol use, missed appointments, hoarding of medications and selling medications). Standard urine drug/toxicology screening processes should be followed (consult a qualified medical review officer). (Auerbach 07) The records indicated that there were four drugs tests performed in the last year; therefore the 5th one would not be indicated.