

Case Number:	CM13-0064172		
Date Assigned:	01/03/2014	Date of Injury:	05/19/2009
Decision Date:	04/16/2014	UR Denial Date:	11/15/2013
Priority:	Standard	Application Received:	12/11/2013

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 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 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:

The patient is a represented [REDACTED] employee who has filed a claim for chronic bilateral knee pain, chronic low back pain, and chronic pain syndrome reportedly associated with an industrial injury of May 19, 2009. Thus far, the patient has been treated with the following: Analgesic medications; attorney representation; multiple knee arthroscopies; multiple series of Synvisc injections; transfer of care to and from various providers in various specialties; and various opioid agents. In a utilization review report of November 15, 2013, the claims administrator denied a request for urine drug testing. The applicant's attorney subsequently appealed. An earlier note of October 29, 2013 is notable for comments that the patient is on Bystolic for hypertension. Large portions of the note are not entirely legible. Bystolic, Protonix, and a dietary referral were endorsed. On September 5, 2013, the patient underwent a viscosupplementation injection. On August 14, 2013, the patient's chronic pain physician sought authorization for an epidural steroid injection. Also reviewed is a September 28, 2013 urine drug test, in which the attending provider seemingly tested for 10 different opioid metabolites, 12 different anti depressive metabolites, 12 different benzodiazepine metabolites, and, furthermore, performed quantitative/confirmatory testing.

IMR ISSUES, DECISIONS AND RATIONALES

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

One drug screening test DOS: 9/20/2013 between 9/20/2013 and 9/28/2013: 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 Drug Testing topic Page(s): 43. Decision based on Non-MTUS Citation ODG Chronic Pain Chapter, Urine Drug Testing topic.

Decision rationale: While page 42 of the MTUS Chronic Pain Medical Treatment Guidelines does support intermittent drug testing in the chronic pain population, the MTUS does not establish specific parameters for or identify a frequency with which to perform drug testing. As noted in the ODG Chronic Pain Chapter Urine Drug Testing topic, an attending provider should clearly state which drug tests and/or drug panels he intends to test for along with the request for authorization. The attending provider should also attach the applicant's complete medication list to the request for authorization for drug testing, ODG further notes. The drug test here included confirmatory testing. The confirmatory testing performed here, however, is not recommended by ODG outside of the emergency department (ED) drug overdose context. The drug test is question, furthermore, tested for multiple different metabolites, did not conform to DOT standards, and the included confirmatory testing, which is not recommended by ODG outside of the drug ED overdose context. For all the stated reasons, then, the request is not certified.