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| <b>Case Number:</b>   | CM14-0006864 |                              |            |
| <b>Date Assigned:</b> | 02/07/2014   | <b>Date of Injury:</b>       | 10/14/2011 |
| <b>Decision Date:</b> | 07/11/2014   | <b>UR Denial Date:</b>       | 12/26/2013 |
| <b>Priority:</b>      | Standard     | <b>Application Received:</b> | 01/18/2014 |

### 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, neck, shoulder, and hand pain reportedly associated with an industrial injury of October 14, 2011. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representations; intermittent urine drug testing; transfer of care to and from various providers in various specialties; and extensive periods of time off of work, on total temporary disability. In a Utilization Review Report dated December 26, 2013, the claims administrator denied a request for urine drug testing. The applicant's attorney subsequently appealed. In a November 13, 2013 initial Workers' Compensation Evaluation, the applicant presented with multifocal neck, elbow, shoulder, and low back pain. The applicant was placed off of work, on total temporary disability. The applicant had issues with depression, ankle pain, and knee pain. A urine drug test was apparently endorsed. It was stated that the applicant might ultimately require a right hand Dupuytren's contracture release surgery. It was, furthermore, stated that the applicant was not taking any medications for pain. It did not appear that the applicant was using any other medications, either. The visit in question did represent a first-time visit with the applicant's current treating provider.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**RETROSPECTIVE 12 PANEL DRUG SCREEN (DOS: 11/13/2013): Upheld**

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

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions Page(s): 397. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG).

**Decision rationale:** While the ACOEM Guidelines states that drug testing can be performed in applicants in whom the presentation or history is suggestive. In this case, however, there was nothing in the applicant's presentation or history which was suggestive of possible illicit substance abuse. The applicant did not request any medications on the date in question. The applicant did not receive any medications on the date in question. It is further noted that the ODG states that quantitative drug testing is not recommended for verifying compliance without evidence of necessity. In this case, however, the attending provider seemingly ordered a host of quantitative drug tests and confirmatory drug testing without compelling evidence of necessity. The ODG does not typically endorse confirmatory drug testing outside of the emergency department drug overdose context. In this case, the drug testing in question transpired in the office setting, without any clear rationale as to quantitative testing was needed or indicated, particularly when the applicant was not receiving any medications prior to the drug tests and/or did not receive any medications on the office visit in question. Therefore, the request is not medically necessary.