

Case Number:	CM14-0012507		
Date Assigned:	06/25/2014	Date of Injury:	02/02/2009
Decision Date:	09/09/2014	UR Denial Date:	01/16/2014
Priority:	Standard	Application Received:	01/30/2014

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 Orthopedic Surgery 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 29-year-old male who was reportedly injured on February 2, 2009. The mechanism of injury was noted as a fall from a forklift platform. The most recent progress note dated June 3, 2014, indicates that there were ongoing complaints of ankle pain. A psychiatric evaluation and treatment for an anxiety disorder was also noted. The assessment was a major depressive disorder with a panic disorder. A previous progress note, dated June 3, 2014, addressed the sequel of the compensable event and noted to include ankle surgery, chronic neck and chronic low back pain, anxiety/depression, posttraumatic stress disorder and complex regional pain syndrome. An attempt to taper from the opioid medications was met by the injured employee by paying for the opioids himself. The physical examination demonstrated a 5'10", 189 pound individual who was hypertensive. There were no pertinent positives identified on physical examination, and the neurological assessment noted normal motor, sensory and deep tendon reflex activity. The medication Percocet was discontinued. Diagnostic imaging studies objectified the recent ankle trauma relative to the felony. Previous treatment included surgical intervention for an ankle injury, multiple pain medications, treatment for complex regional pain syndrome and spinal cord stimulator insertion. A request had been made for multiple medications and a urinalysis and was not certified in the pre-authorization process on January 16, 2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Baclofen Serum: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug testing; Opioids, screening for risk of addiction (tests).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 22, 70 of 127.

Decision rationale: The progress notes indicate a chronic pain situation. Several notes indicate that the opioid medications were going to be discontinued. There was reference to a surgical consultation. However, there was no documentation of any complaints or ideologies requiring a complete blood count assessment. Therefore, based on the multiple progress notes reviewed, there is no medical necessity for such a study.

GGTP (gamma-glutamyl transpeptidase): Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug testing; Opioids, screening for risk of addiction (tests).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: Emdin M, Pompella A, Paolicchi A (2005). "Editorial - Gamma-glutamyltransferase, atherosclerosis, and cardiovascular disease: triggering oxidative stress within the plaque". Circulation 112 (14): 2078-80.

Decision rationale: This assessment is to test for an enzyme that transfers gamma-glutamyl functional groups. There is nothing in the progress notes reviewed to suggest that there is any compromise in the liver to suggest the need for such a study. Until there is a comprehensive clinical assessment, noted subjective complaints with objective findings, such a study is not medically necessary.

Alprazolam Serum: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug testing.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Benzodiazepines Page(s): 24 of 127.

Decision rationale: Based on the lack of specific clinical information, there is insufficient data presented to establish a medical necessity for a serum testing of this medication. Medical necessity is not established.

UA (urinalysis) Complete: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug testing; Opioids, screening for risk of addiction (tests).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug testing Page(s): 43 of 127..

Decision rationale: It is noted that the injured worker was being treated for psychiatric disease, a recent trauma and the medication profile was not outlined in the progress notes reviewed. Furthermore, there are no urinary tract complaints, abdominal complaints or any other clinical parameters to seek a urinalysis. Therefore, based on this rather incomplete medical evidence, medical necessity has not been established.

CBC (complete blood count) with differential: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug testing; Opioids, screening for risk of addiction (tests).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 22, 70 of 127.

Decision rationale: The progress notes indicate a chronic pain situation. Several notes indicate that the opioid medications were going to be discontinued. There was reference to a surgical consultation; however, there was no documentation of any complaints or ideologies requiring a complete blood count assessment. Therefore, based on the multiple progress notes reviewed, there is no medical necessity for such a study.

Acetaminophen Serum: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug testing.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 67 of 127.

Decision rationale: As outlined in the chronic pain aspect of the California Medical Treatment Utilization Schedule, the use of acetaminophen is cautioned as there are significant hepatic complications. However, there is nothing in the record to suggest liver disease, liver complaints, or any other competition with uses preparation. Until there is a comprehensive clinical assessment outlining the medical necessity for such testing, such necessity has not been established.

Free Testosterone: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug testing; Opioids, screening for risk of addiction (tests).

MAXIMUS guideline: The Expert Reviewer did not cite any medical evidence for its decision.

Decision rationale: None of the progress notes reviewed indicate any discussion about testosterone. Therefore, no medical necessity has been established to decide upon "free testosterone."

Chemistry 19: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug testing; Opioids, screening for risk of addiction (tests).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) pain chapter, updated June 2014.

Decision rationale: While it is noted that this injured worker has undergone a recent related trauma, there is nothing in any the progress of presented for review indicating any maladies that will require a multipanel hematological assessment. Therefore, based on the lack of clinical information, medical necessity has not been established for this study.

Oxycodone: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug testing; Opioids, screening for risk of addiction (tests).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 74, 78, 93 of 127.

Decision rationale: The records reflect that opioid narcotics have been discontinued. There has been no signs or symptoms related to withdrawal, and that they had been essentially weaned. Therefore, there is no medical necessity established for the ongoing use of opioid medication.

EIA (enzyme immunoassay) 9: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug testing; Opioids, screening for risk of addiction (tests).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 22, 70 of 127.

Decision rationale: The progress notes indicate a chronic pain situation. Several notes indicate that the opioid medications were going to be discontinued. There was reference to a surgical consultation. However, there was no documentation of any complaints or ideologies requiring a complete blood count assessment. Therefore, based on the multiple progress notes reviewed, there is no medical necessity for such a study.

TSH (thyroid stimulating hormone): Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug testing; Opioids, screening for risk of addiction (tests).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 22, 70 of 127.

Decision rationale: The progress notes indicate a chronic pain situation. Several notes indicate that the opioid medications were going to be discontinued. There was reference to a surgical consultation. However, there was no documentation of any complaints or ideologies requiring a complete blood count assessment. Therefore, based on the multiple progress notes reviewed, there is no medical necessity for such a study.