

Case Number:	CM14-0015117		
Date Assigned:	02/28/2014	Date of Injury:	02/18/2013
Decision Date:	06/30/2014	UR Denial Date:	01/29/2014
Priority:	Standard	Application Received:	02/06/2014

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 Family 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 patient is a 24 year-old male who was injured at work on 2/18/2013. The injury was primarily to the thoracic and lumbar spine. An appeal has been submitted for review of a denial for urine drug testing as part of the management of his ongoing treatment with opioids for his chronic pain. The patient has been seen repeatedly by his primary care treatment provider for thoracic and lumbar back pain since the initial injury. Over the course of his treatment he has experienced episodic exacerbations of his pain. He underwent imaging with an MRI and the findings were described as "normal." Treatment for his pain has included: physical therapy, epidural injections, and tramadol/acetaminophen, acupuncture, and non-steroidal anti-inflammatory medications. Ongoing diagnoses have included: Thoracic Strain, Low Back Pain and Sciatica. The records indicate that the patient has undergone repeated urine drug screening. A test was reported on 10/28/2013 with the findings: "Inconsistent with prescription therapy." "Tramadol NOT DETECTED by GC/MS." There was also a test reported on 7/23/2013 with the findings: "Inconsistent with prescription therapy." Cyclobenzaprine NOT DETECTED by GC/MS. Tramadol was not detected either; despite being reported as prescribed.

IMR ISSUES, DECISIONS AND RATIONALES

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

URINALYSIS FOR DOS 12/12/2013: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: CHRONIC PAIN MEDICAL TREATMENT GUIDELINES, ,

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: CHRONIC PAIN MEDICAL TREATMENT GUIDELINES, , 77-79, 84-85

Decision rationale: The California Medical Treatment Utilization Schedule (MTUS) Chronic Pain Medical Treatment Guidelines comment on the use of urine drug screening for patients on opioid therapy. Urine drug screening may be considered as a means to assess for the use or the presence of illegal drugs (Page 77). It may be used as a means to document misuse of medications such as drug diversion (Page 78). It may be used to assess if there are repeated violations from the medication contract or to determine if there is any other evidence of abuse, addiction or possible diversion (Page 79 and 84). It may be used as a marker for opioid dependence and addiction. Specifically, if "urine toxicology screen [is] negative for prescribed drugs on at least two occasions (an indicator of possible diversion)(Page 85)." Based on the two documented negative urine drug tests reported on 7/23/13 and 10/28/13, this patient meets the MTUS/Chronic Pain Medical Treatment Guideline criteria for possible diversion. Under these conditions, further drug testing should be appropriate. However, there is no evidence in the available medical records that the treating physician took action in dealing with these two negative urine drug tests. As noted in the guidelines (Page 84), "many physicians will allow one "slip" from a medication contract without immediate termination of opioids/controlled substances, with the consequences being a re-discussion of the clinic policy on controlled substances, including the consequences of repeat violations. If there are repeated violations from the medication contract or any other evidence of abuse, addiction, or possible diversion, it has been suggested that a patient show evidence of consultation with a physician trained in addiction treatment for assessment of the situation and possible detoxification. It is also suggested that a patient be given a 30-day supply of medications or be started on a slow weaning schedule if a decision is made by the physician to terminate prescribing of opioid/controlled substances." Given the lack of documentation of response to the two documented negative urine drug tests, further urine drug testing is not considered medically necessary.