

Case Number:	CM14-0125787		
Date Assigned:	08/13/2014	Date of Injury:	08/27/2004
Decision Date:	09/24/2014	UR Denial Date:	07/10/2014
Priority:	Standard	Application Received:	08/08/2014

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:

This is a 61-year-old male with an 8/27/04 date of injury. The mechanism of injury was not noted. According to a progress note dated 7/14/14, the patient complained of localized axial low back pain without radicular symptoms. The patient is utilizing Norco for breakthrough pain, Gabapentin for neuropathic pain, Meloxicam as an anti-inflammatory, and Laxacin as a stool softener. He rated his pain at 6-7/10 with current medication regimen and 10/10 without medications. The patient shows no evidence of drug seeking behavior. Urine drug screening has shown evidence of compliance with prescribed medications. Objective findings: tenderness to palpation over the L3-L4 and L4-L5 paravertebral joints with 1+ muscle spasms, restricted lumbar ROM, intact sensory in the distal dermatome. Diagnostic impression: low back pain with lumbar facet joint hypertrophy, lumbar radiculopathy, multilevel lumbar degenerative disc disease, cervical spine sprain/strain with degenerative disc disease, left shoulder sprain/strain. Treatment to date includes: medication management, activity modification, physical therapy, chiropractic therapy, acupuncture, and epidural steroid injection. A UR decision dated 7/10/14 modified the request for urine drug screen four times a year to three times a year. The clinician does not indicate that this individual is at high risk of abuse.

IMR ISSUES, DECISIONS AND RATIONALES

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

Random Urine Drug Screen four times a year: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug Testing Page(s): 43. Decision based on Non-MTUS Citation Official Disability Guidelines Treatment for Workers Compensation, Low Back-Lumbar & Thoracic (Acute & Chronic).

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 10 Elbow Disorders (Revised 2007) Page(s): 222-238, Chronic Pain Treatment Guidelines Page(s): 43, 78.

Decision rationale: CA MTUS Chronic Pain Medical Treatment Guidelines state that a urine analysis is recommended as an option to assess for the use or the presence of illegal drugs, to assess for abuse, to assess before a therapeutic trial of opioids, addiction, or poor pain control in patients under on-going opioid treatment. Screening is recommended at baseline, randomly at least twice and up to 4 times a year and at termination. The patient is currently utilizing the medication Norco. However, this request is for urine drug tests 4 times a year without a definite end-point. Patients utilizing chronic opioid therapy require ongoing management including documentation of pain relief, functional status, appropriate medication use, and side effects. Issues of abuse, addiction, or poor pain control must be regularly assessed. Therefore, the request for random urine drug screen four times a year is not medically necessary.