

Case Number:	CM14-0173429		
Date Assigned:	10/24/2014	Date of Injury:	02/18/2010
Decision Date:	12/26/2014	UR Denial Date:	09/24/2014
Priority:	Standard	Application Received:	10/21/2014

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 anxiety, depression, psychological stress, and knee pain reportedly associated with an industrial injury of February 18, 2010. Thus far, the applicant has been treated with the following: Analgesic medications; transfer of care to and from various providers in various specialties; reported diagnosis with severe knee arthritis; multiple prior knee surgeries; and unspecified amounts of physical therapy over the course of the claim. In a Utilization Review Report dated September 24, 2014, the claims administrator failed to approve a urine drug test via a request for Request for Authorization (RFA) dated July 16, 2014. The applicant's attorney subsequently appealed. In a July 15, 2014 progress note, the applicant presented reporting ongoing complaints of knee pain, inability to play sports, and weight gain. The applicant had comorbid issues with diabetes, it was noted. It was suggested that the applicant was currently working with limitations in place, despite ongoing complaints of low back and knee pain with derivative complaints of anxiety, depression, psychological stress, and reflux. The applicant was obese, with a BMI of 35. Aquatic therapy was endorsed, along with an internal medicine evaluation and a psychiatric evaluation. Knee MRI imaging and home health assistance was sought while Prilosec and Tylenol No. 3 were endorsed. Medical transportation was endorsed. The applicant was given work restrictions on this occasion as well.

IMR ISSUES, DECISIONS AND RATIONALES

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

Urine drug test: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids, Drug Testing Page(s): 77-78, 94 and 43.

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 43 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. ODG's Chronic Pain Chapter Urine Drug Testing topic, however, does stipulate that an attending provider should clearly state which drug tests and/or drug panels he intends to test for, identify when the applicant was last tested, attach an applicant's complete medication list to the request for authorization for testing, attempt to conform to the best practices of the United States Department of Transportation (DOT) when performing testing and eschew confirmatory or quantitative testing outside of the emergency department drug overdose context. Here, however, the attending provider did not state when the applicant was last tested. It was not clearly stated what drug tests and/or drug panels were being tested for. ODG further recommends that applicants be stratified in the higher or lower-risk categories for which more or less frequent drug testing is recommended. Here, however, the attending provider made no attempt to categorize the applicant into higher or lower risk categories for which more or less frequent drug testing would have been indicated. Therefore, the request was not medically necessary.