

Case Number:	CM14-0176082		
Date Assigned:	10/29/2014	Date of Injury:	05/11/2010
Decision Date:	12/05/2014	UR Denial Date:	09/25/2014
Priority:	Standard	Application Received:	10/23/2014

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 New Jersey. 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 worker is a 59-year old female who was injured on cumulatively leading up to 5/11/2010. She was diagnosed with neck pain, C3-C6 degenerative disc disease with cervical radiculopathy, low back pain with lumbar radiculopathy, fibromyalgia, and mild depression. She was treated with surgery (cervical), opioid medications, anti-epileptics, antidepressants, sleep aids, injections, chiropractor treatments, and physical therapy. On 8/13/14, the worker was seen by a rheumatologist for a medical-legal consultation regarding her chronic pain. She reported having constant widespread pain (neck, head, low back, legs). She also reported difficulty sleeping and also feels depressed at times. She reported using Lyrica, Premarin, Tramadol, Zanaflex, Trazodone, and Ambien. She reported having alcohol in small amounts on the weekend. It was assessed that the worker did not have a rheumatological disease. She was then recommended exercise, tramadol, Lyrica, and Zanaflex. A comprehensive drug screen was then performed.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective Review for DOS 08/13/14 for Comprehensive Drug screen: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids, criteria for use Page(s): 43.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug testing Opioids Page(s): 43 77 78 86.

Decision rationale: The MTUS Chronic Pain Guidelines state that urine drug screening tests may be used to assess for the use or the presence of illegal drugs. Drug screens, according to the MTUS, are appropriate when initiating opioids for the first time, and afterwards periodically in patients with issues of abuse, addiction, or poor pain control. The MTUS lists behaviors and factors that could be used as indicators for drug testing, and they include: multiple unsanctioned escalations in dose, lost or stolen medication, frequent visits to the pain center or emergency room, family members expressing concern about the patient's use of opioids, excessive numbers of calls to the clinic, family history of substance abuse, past problems with drugs and alcohol, history of legal problems, higher required dose of opioids for pain, dependence on cigarettes, psychiatric treatment history, multiple car accidents, and reporting fewer adverse symptoms from opioids. In the case of this worker, the worker had been using various opioids before being recommended tramadol by the rheumatologist. There was no documented evidence that the worker required such a drug screen at that time as there was no evidence of drug abuse or addiction. If the intention was to do a baseline screening before starting tramadol for the first time, this would also not be necessary, as this worker had already used opioids for a long time before the request. Therefore, the drug screen is not medically necessary.