

Case Number:	CM14-0025671		
Date Assigned:	06/13/2014	Date of Injury:	11/10/2009
Decision Date:	07/18/2014	UR Denial Date:	02/18/2014
Priority:	Standard	Application Received:	02/28/2014

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 Physical Medicine and Rehabilitation, has a subspecialty in Neuromuscular Medicine and is licensed to practice in Maryland. 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 44 year old female with a low back work injury dated 11/10/09. The diagnoses include lumbar spine strain/sprain; lumbar facet arthropathy and lumbar disc bulges. Under consideration is a request for lab work chromatography quantitative. There is a 4/1/14 progress note that states that the patient takes Ibuprofen and Tizanidine. Due to her hypertension the treatment plan included stopping the Ibuprofen and was starting Norco on a needed basis. There is a 2/4/14 progress report that states that the patient had a urine toxicology screen that was negative. There was a CURES report that shows no abnormal behavior. The patient denies receiving medication from any other source or using illicit drugs. This document states that the last 2 urine drug screens were negative for Norco so the provider will not prescribe anymore Norco. He states that the patient uses Norco as needed. There is a 2/6/14 request for quantitative chromatography. A 12/17/13 document reveals that the urine toxicology screen reveals no Hydrocodone in the patient's system. The patient had been prescribed Norco. The patient stated that on that day due to her driving and even the day before she did not use the Norco.

IMR ISSUES, DECISIONS AND RATIONALES

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

LAB WORK CHROMATOGRAPHY, QUANTITATIVE: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines. The MTUS guidelines do not specifically discuss address this issue. The ODG guidelines state that laboratory-based specific drug identification, which includes gas chromatography/ spectrometry or liquid chromatography tandem mass spectrometry. These tests allow for identification and quantification of specific drug substances. They are used to confirm the presence of a given drug, and/or to identify drugs that cannot be isolated by screening tests. The tests allow for identification of drugs that are not identified in the immunoassay screen. The ODG states that confirmation should be sought for all samples testing negative for prescribed drugs. The documentation indicates that the patient's urine testing was negative despite being prescribed opioids. The request for lab work drug testing, quantitative is in accordance with the ODG recommendations and therefore is medically necessary. Decision based on Non-MTUS Citation Non-MTUS Official Disability Guidelines (ODG), Urine Drug Testing (UDT).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Non-MTUS Official Disability Guidelines (ODG), Urine Drug Testing (UDT).

Decision rationale: The MTUS guidelines do not specifically discuss address this issue. The ODG guidelines state that laboratory-based specific drug identification, which includes gas chromatography/ spectrometry or liquid chromatography tandem mass spectrometry. These tests allow for identification and quantification of specific drug substances. They are used to confirm the presence of a given drug, and/or to identify drugs that cannot be isolated by screening tests. The tests allow for identification of drugs that are not identified in the immunoassay screen. The ODG states that confirmation should be sought for all samples testing negative for prescribed drugs. The documentation indicates that the patient's urine testing was negative despite being prescribed opioids. The request for lab work drug testing, quantitative is in accordance with the ODG recommendations and therefore is medically necessary.