

Case Number:	CM14-0034284		
Date Assigned:	06/20/2014	Date of Injury:	08/18/1999
Decision Date:	07/18/2014	UR Denial Date:	03/06/2014
Priority:	Standard	Application Received:	03/19/2014

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 51 year old female who was injured on 8/18/99 and later diagnosed with cervical discopathy/stenosis, bilateral upper extremity overuse tendonitis, lumbosacral spine pain, as well as anxiety and depression. Her chronic neck pain and related arm pain (radiculopathy) has been treated over the years with oral medications, including opioids, TENS unit, injected medications, topical medications, sleep aids, anti-anxiety medications, exercise, and physical therapy. On 1/31/14 the worker was seen by her orthopedic physician complaining of her neck pain which was mostly left sided as well as her arm numbness and tingling on both arms and low back pain. Collectively her pain was rated at a 6/10 on the pain scale. A review of systems revealed that she still had depression. She was recommended she continue conservative therapy which involved topical analgesics, opioid oral medication, sleep aids, and anti-anxiety medication, and was given an intramuscular injection for pain relief. A urine drug screen test was also ordered to "monitor medication compliance".

IMR ISSUES, DECISIONS AND RATIONALES

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

Urinalysis(date of service 01/31/2014): Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

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, he had been using opioids chronically leading up to the request. However, the evidence from the notes provided for review only revealed that the worker had depression, but no other suggestions that she was abusing medication. Depression alone should not be the only reason to do urine drug testing, if this was the intention of the treating physician. Without further evidence of the criteria being met for urine drug testing in this worker, the urinalysis (urine drug screening) is not medically necessary.