

Case Number:	CM14-0038831		
Date Assigned:	06/27/2014	Date of Injury:	08/03/2012
Decision Date:	08/06/2014	UR Denial Date:	03/17/2014
Priority:	Standard	Application Received:	04/02/2014

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 chronic neck pain, knee pain, and low back pain reportedly associated with an industrial injury of August 3, 2012. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representation; topical compounds; transfer of care to and from various providers in various specialties; unspecified amounts of physical therapy; functional capacity testing; unspecified amounts of acupuncture; and work restrictions. It does not appear that the applicant is working with limitations in place, however. In a Utilization Review Report dated March 17, 2014, the claims administrator denied a urine toxicology screen. The applicant's attorney subsequently appealed. In a handwritten note dated June 6, 2014, the applicant was described as having persistent complaints of neck, shoulder, and low back pain. The applicant was reportedly pending MRIs of multiple body parts, including neck, low back, and shoulder. The applicant was given prescriptions for Norco. The note was sparse, handwritten, and difficult to follow. A rather proscriptive 10-pound lifting limitation was endorsed, along with prescriptions for additional physical therapy. It appears that the urine drug screen was requested through an earlier note of January 27, 2014, although this was handwritten, difficult to follow, and employed preprinted checkboxes, and was not entirely legible. The applicant was, on this occasion, given prescriptions for various medications, including Naprosyn, Flexeril, and tramadol. The note was extremely difficult to follow, however.

IMR ISSUES, DECISIONS AND RATIONALES

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

urine toxicology: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, urine drug testing.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines page 43, 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 establish a frequency with which to perform drug testing. As noted in the ODG Chronic pain chapter, Urine drug testing topic, an attending provider should attach an applicant's complete medication list to the request for authorization for drug testing. An attending provider should also state when the last time, an applicant was tested and, furthermore, state which drug tests and/or drug panels he intends to test for. In this case, however, none of the above mentioned criteria were met. The attending provider did not state when the last time the applicant was tested. The attending provider did not state what drug tests and/or drug panels he intended to test for, nor did the attending provider attach the applicant's complete medication list to the request for authorization for testing. Therefore, the request for urine toxicology is not medically necessary.