

Case Number:	CM14-0089353		
Date Assigned:	07/23/2014	Date of Injury:	04/01/2013
Decision Date:	10/08/2014	UR Denial Date:	05/20/2014
Priority:	Standard	Application Received:	06/13/2014

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 and shoulder pain reportedly associated with an industrial injury of April 1, 2013. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representation; unspecified amounts of physical therapy; anxiolytic medications; and opioid therapy. In a Utilization Review Report dated May 20, 2014, the claims administrator denied a request for genetic metabolism testing and opioid risk testing. The claims administrator incidentally noted that the applicant had alleged cumulative trauma as opposed to a specific, discrete injury. In a July 7, 2014 progress note, the applicant reported persistent complaints of neck and back pain, 4/10. The applicant was using a topical compounded cream with anti-inflammatory, gabapentin, and lidocaine ingredients, it was stated. The applicant was already permanent and stationary, it was acknowledged. Tramadol was also endorsed. Genetic metabolic testing was sought on a progress note dated May 5, 2014. The applicant was given a refill of tramadol at that point in time, it was suggested. In a June 6, 2014 progress note, the applicant reported unchanged neck and low back pain. A neurosurgical consultation was endorsed. The applicant was returned to regular duty work.

IMR ISSUES, DECISIONS AND RATIONALES

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

Genetic Metabolism test: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Cytokine DNA Testing for Pain topic. Page(s): 42.

Decision rationale: As noted on page 42 of the MTUS Chronic Pain Medical Treatment Guidelines, DNA testing is "not recommended" in the diagnosis of pain, including the chronic pain reportedly present here. By implication, then, the genetic metabolism testing being sought here is likewise not recommended. The attending provider did not proffer any compelling applicant-specific rationale or medical evidence which would offset the unfavorable MTUS position on the article at issue. Therefore, the request is not medically necessary.

Genetic opioid risk test: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Cytokine DNA Testing for Pain. Page(s): 42.

Decision rationale: As noted on page 42 of the MTUS Chronic Pain Medical Treatment Guidelines, there is no evidence which would support usage of DNA testing in the diagnosis of pain, including the chronic pain reportedly present here. As with the other request, the attending provider has not outlined any compelling applicant-specific rationale or medical evidence which would offset the unfavorable MTUS position on the genetic opioid risk testing/DNA testing at issue here. It is further noted that the applicant appears to have returned to regular duty work and is simply using a synthetic opioid, tramadol. The applicant does not, thus, appear to be an individual at heightened risk for opioid abuse. For all of the stated reasons, then, the request is not medically necessary.