

<b>Case Number:</b>	CM14-0089578		
<b>Date Assigned:</b>	09/19/2014	<b>Date of Injury:</b>	07/11/2005
<b>Decision Date:</b>	12/15/2014	<b>UR Denial Date:</b>	05/20/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	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 Internal Medicine and is licensed to practice in New York. 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 date of injury of 07/11/2005. The mechanism of injury was not provided for review. On 05/05/2014 she had right shoulder pain and was taking Vicodin, Hydrocodone/APAP, Soma and Alprazolam. She takes the medications mostly at night and there are effective.

### 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- TWCPain Summary late updated 4/10/2014

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) 2014 Pain, Genetic Testing fro Potential Opioid Abuse.

**Decision rationale:** The requested testing is not standard of care and there is nothing in the clinical documentation provided for review to substantiate any special metabolic opioid issue. MTUS, ACOEM is silent on this topic. OGD 2014, Pain, Genetic Testing for Opioid Abuse - "Not recommended. While there appears to be a strong genetic component to addictive behavior,

current research is experimental in terms of testing for this. Studies are inconsistent, with inadequate statistics and large phenotype range. Different studies use different criteria for definition of controls. More work is needed to verify the role of variants suggested to be associated with addiction and for clearer understanding of their role in different populations." Therefore, the request for Genetic Metabolism Test is not medically necessary and appropriate.

**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- TWCPain Summary late updated 4/10/2014

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) 2014 Pain, Opioids Genetic Testing for Potential Opioid Abuse.

**Decision rationale:** The requested testing is not the standard of care and there is nothing provided in the clinical documentation to substantiate special opioid genetic or metabolic testing. MTUS, ACOEM is silent on this subject. ODG, 2014 Opioids, Genetic Testing for Potential Opioid Abuse - "Not recommended. While there appears to be a strong genetic component to addictive behavior, current research is experimental in terms of testing for this. Studies are inconsistent, with inadequate statistics and large phenotype range. Different studies use different criteria for definition of controls. More work is needed to verify the role of variants suggested to be associated with addiction and for clearer understanding of their role in different populations. "Therefore, the request for Genetic Opioid Risk Test is not medically necessary and appropriate.