

<b>Case Number:</b>	CM14-0096163		
<b>Date Assigned:</b>	07/25/2014	<b>Date of Injury:</b>	03/17/2013
<b>Decision Date:</b>	11/10/2014	<b>UR Denial Date:</b>	06/05/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/24/2014

### 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 Anesthesiology, has a subspecialty in Pain Management 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:

According to the records made available for review, this is a 39-year-old female with a 3/17/13 date of injury. At the time (5/28/14) of request for authorization for genetic metabolism test and genetic opioid risk test, there is documentation of subjective (low back and leg pain) and objective (tenderness to palpation over the lumbar paraspinal muscles with palpable twitch and trigger points, and decreased lumbar range of motion) findings, current diagnoses (lumbar spine radiculopathy and lumbosacral spondylosis), and treatment to date (physical therapy and medications (ongoing therapy with Norco). In addition medical report plan identifies genetic drug metabolism test to evaluate genetic predisposition in cytochrome P450 drug metabolism enzymes; and genetic opioid risk test to identify genetic risk factors of narcotic abuse, tolerance, and dependence.

### 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  
<http://www.ncbi.nlm.nih.gov/pubmed/14996240> Pain Med. 2004 Mar;5(1): 81-93

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical

Evidence:

<http://www.practicalpainmanagement.com/treatments/pharmacological/opioids/genetic-screening-defects-opioid-metabolism-historical>

**Decision rationale:** MTUS and ODG do not address the issue. Medical Treatment Guideline identifies documentation of subjective/objective findings for which genetic metabolism testing is indicated (such as: to screen for defects only if there is historical evidence and/or abnormal opioid blood levels that suggest the presence of a defect) to support the medical necessity of genetic metabolism testing. Within the medical information available for review, there is documentation of diagnoses of lumbar spine radiculopathy and lumbosacral spondylosis. In addition, there is documentation of ongoing treatment with Norco. However, despite documentation of a plan identifying genetic drug metabolism test to evaluate genetic predisposition in cytochrome P450 drug metabolism enzymes, there is no documentation of subjective/objective findings for which genetic metabolism testing is indicated (such as: to screen for defects only if there is historical evidence and/or abnormal opioid blood levels that suggest the presence of a defect). Therefore, based on guidelines and a review of the evidence, the request for Genetic Metabolism Test 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 - Pain

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

**Decision rationale:** MTUS does not address this issue. ODG identifies that genetic testing for potential opioid abuse is not recommended and that current research is experimental in terms of testing for this. Therefore, based on guidelines and a review of the evidence, the request for Genetic Opioid Risk Test is not medically necessary.