

Case Number:	CM14-0207288		
Date Assigned:	12/17/2014	Date of Injury:	03/05/2001
Decision Date:	02/09/2015	UR Denial Date:	11/14/2014
Priority:	Standard	Application Received:	12/11/2014

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 Practice, 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 58 year old female who was injured on 3/5/2001. She was diagnosed with chondromalacia/synovitis of the right knee. She was treated with medications and surgery (right knee). On 10/9/14, a letter by the requesting orthopedic physician reported some details about an office visit that same day with the worker. She reported doing fairly well, refusing an injection to her right knee. X-rays of the right knee showed minimal patella spurs. She did not report any episodes of buckling, although the knee does "bother her some." Physical findings included normal muscle tone and normal sensation, no effusion, and ligament stability. She was reportedly taking medications, which were not listed in the letter. She was prescribed her non-narcotic pain pills, muscle relaxants, and anti-inflammatory medications. A urine drug screen test was also ordered on that same day (10/9/14). An undated urine drug screen test was submitted for review showing evidence of Tramadol as well as Meprobamate use.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retro Urine Drug Screen 10-9-14: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug Testing, Opioids. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Treatment in Workers Compensation Urine Drug Testing (UDT)

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug testing; Opioids Page(s): 43; 77, 78 and 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, there was some evidence to suggest that she was using potentially addictive medications (tramadol); however, this was not clearly stated. Also, and more importantly, there was no evidence from the documents provided that clearly suggest the worker was abusing her medications or acting abnormally suspicious, which would warrant completing a urine drug screen test. Therefore, the urine drug screen test will be considered medically unnecessary, considering the evidence provided for review.