

Case Number:	CM14-0209023		
Date Assigned:	12/22/2014	Date of Injury:	06/27/2012
Decision Date:	02/11/2015	UR Denial Date:	12/11/2014
Priority:	Standard	Application Received:	12/15/2014

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 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 injured worker (IW) is a 44-year-old man with a date of injury of June 27, 2012. The mechanism of injury occurred when the IW was climbing down a ladder when suddenly, his left knee buckles. Following the knee injury, he began to limp, and subsequently developed low back pain. The injured worker's working diagnoses are lumbar disc disease; lumbar radiculopathy; and lumbar facet syndrome. Pursuant to the comprehensive pain management consultation dated November 12, 2014, the IW complains of lumbar spine pain. Examination of the lumbar spine reveals diffuse tenderness notes over the lumbar paravertebral musculature. There is moderate facet tenderness noted over the L4-S1 spinous processes. The provider reports the IW is currently taking over-the-counter Advil for the above condition. The treating physician is recommending a urine drug toxicology screening as a random drug screening to establish baseline, ensure compliance with medications, and to ensure that he is not taking any medications from multiple sources or using illicit drugs. The IW denies taking any illicit drugs. The current request is for urine drug testing.

IMR ISSUES, DECISIONS AND RATIONALES

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

Urine Drug Testing: Upheld

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG); Pain Section, Urine Drug Screen.

Decision rationale: Pursuant to the Official Disability Guidelines, urine drug testing is not medically necessary. Urine drug testing is recommended as a tool to monitor compliance with prescribed substances, identify use of undisclosed substances, and uncover diversion of prescribed substances. This test should be used in conjunction with other clinical information when decisions are to be made to continue, adjust or discontinue treatment. The frequency of urine drug testing to determine by whether the injured worker is a low risk, intermediate or high risk drug misuse or abuse. In this case, the injured worker's working diagnoses are lumbar disc disease; lumbar radiculopathy; and lumbar facet syndrome. The documentation from a November 12, 2014 progress note indicates the patient "is taking over -the- counter Advil for the above-noted conditions". The treating physician ordered the urine drug test as "baseline to check illegal drugs". The guidelines do not recommend random drug testing in the absence of aberrant drug seeking behavior. There is no documentation in the medical record indicating this is an intermediate or high risk individual for drug misuse or abuse. As noted above, the injured workers only taking over-the-counter medications. Consequently, absent the clinical indication and/or clinical rationale for performing urine drug screen, urine drug testing is not medically necessary.