

Case Number:	CM15-0161056		
Date Assigned:	08/27/2015	Date of Injury:	12/15/2011
Decision Date:	10/02/2015	UR Denial Date:	08/03/2015
Priority:	Standard	Application Received:	08/17/2015

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:
 State(s) of Licensure: Texas, New York, California
 Certification(s)/Specialty: Preventive Medicine, Occupational Medicine

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 56-year-old who has filed a claim for chronic low back and shoulder pain reportedly associated with an industrial injury of December 15, 2011. In a Utilization Review report dated August 3, 2015, the claims administrator failed to approve a request for urine toxicology testing (AKA urine drug testing). The claims administrator referenced an RFA form received on July 27, 2015 in its determination, along with a progress note dated July 15, 2015. The applicant's attorney subsequently appealed. On a July 20, 2015 progress note, the applicant reported ongoing complaints of low back pain. The applicant is pending a lumbar laminectomy-discectomy procedure. The applicant was given a rather proscriptive 10-pound lifting limitation. The applicant was not working with said limitation in place, the treating provider acknowledged. The applicant's medication list was not seemingly detailed. Drug testing was endorsed.

IMR ISSUES, DECISIONS AND RATIONALES

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

Urine toxicology: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug testing Page(s): 94-95.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug testing Page(s): 43. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain (Chronic), Urine drug testing (UDT).

Decision rationale: No, the request for urine toxicology testing (AKA urine drug testing) was not medically necessary, medically appropriate, or indicated here. While page 43 of the MTUS Chronic Pain Medical Treatment Guidelines does recommend drug testing as an option in the chronic pain population, to assess for the presence or absence of illicit drugs, the MTUS does not establish specific parameters for or identify a frequency with which to perform drug testing. ODG's Chronic Pain Chapter Urine Drug Testing topic, however, stipulates that an attending provider should attach an applicant's complete medication list to the request for authorization for testing, and should eschew confirmatory and/or quantitative testing outside of the emergency department drug overdose context, should attempt to conform to the best practices of the United States Department of Transportation (DOT) when performing drug testing, should clearly identify when an applicant was last tested, and should attempt to categorize the applicants into higher-or lower-risk categories for whom more or less frequent drug testing would be indicated. Here, however, the July 20, 2015 progress note at issue did not state what (if any) medications the applicant was using. It was not stated when the applicant was last tested. The attending provider neither signaled intention to eschew confirmatory testing nor signaled his intention to conform to the practice of United States Department of Transportation when performing testing. Since multiple ODG criteria for the pursuit of drug testing were not seemingly met, the request was not indicated. Therefore, the request was not medically necessary.