

Case Number:	CM15-0195756		
Date Assigned:	10/09/2015	Date of Injury:	08/22/2011
Decision Date:	11/25/2015	UR Denial Date:	09/24/2015
Priority:	Standard	Application Received:	10/05/2015

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: New York
 Certification(s)/Specialty: Anesthesiology

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 is a 50 year old male, who sustained an industrial injury on August 22, 2011. The initial symptoms reported by the injured worker are unknown. The injured worker was currently diagnosed as having shoulder pain, cervicgia, pain of cervical facet joint, headache, myalgia and myositis unspecified, lumbago, degeneration of lumbar or lumbosacral intervertebral disc, thoracic or lumbosacral neuritis or radiculitis unspecified and chronic pain syndrome. Treatment to date has included home exercises, diagnostic studies, physical therapy, H-wave and medications. His medications were noted to be well tolerated and help to increase function. In reported dated May 11, 2015, notes stated that urine toxicology results from April 13, 2015 came back. The results were positive for hydrocodone and negative for all other substances, which was consistent with what was being prescribed. On September 3, 2015, the injured worker complained of stabbing and aching pain in his neck and upper back, aching and burning in his shoulders, stabbing and aching in his low back, burning and aching in his knees, stabbing and burning in his left foot, aching and burning in his left ankle and aching and numbing in his wrists. He rated his pain as a 6-7 on a 1-10 pain scale without pain medication and a 5-6 with pain medication. On the day of exam, his medication regimen included Butrans, Prilosec and Celebrex. His pain was noted to be unchanged since a prior appointment. The treatment plan included continuation of home exercises, H-wave, heat, ice and medication management. On September 24, 2015, utilization review denied a retrospective request for quantitative urine drug screen date of service 04-13-2015, quantitative urine drug screen date of service 02-13-2015, quantitative urine drug screen date of service 08-28-2014 and quantitative urine drug screen date of service 07-24-2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective Quantitative Urine Drug Screen DOS 4/13/15: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Anti-inflammatory medications, Drug testing, Opioids (Classification).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Drug testing. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Urine Drug Testing.

Decision rationale: According to CA MTUS (2009), a urine drug screen is recommended as an option to assess for the use or the presence of illegal drugs. According to ODG, urine drug testing (UDT) is a recommended tool to monitor compliance with prescribed substances, identify use of undisclosed substances, and uncover diversion of prescribed substances. There is currently no way to tell from a urine drug test the exact amount of drug ingested or taken, when the last dose was taken, or the source of the drug. Quantitative urine drug testing is not recommended for verifying compliance without evidence of necessity. In this case, a qualitative urine drug test was not found to be medically necessary. Since the qualitative urine drug test was not medically necessary, any quantitative urine drug test performed on 4/13/15 was also not medically necessary. Medical necessity for the requested testing was not established. The requested test was not medically necessary.

Retrospective Quantitative Urine Drug Screen DOS 2/13/15: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Drug testing, Opioids (Classification).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Drug testing. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Urine Drug Testing.

Decision rationale: According to CA MTUS (2009), a urine drug screen is recommended as an option to assess for the use or the presence of illegal drugs. According to ODG, urine drug testing (UDT) is a recommended tool to monitor compliance with prescribed substances, identify use of undisclosed substances, and uncover diversion of prescribed substances. There is currently no way to tell from a UDT the exact amount of drug ingested or taken, when the last dose was taken, or the source of the drug. Quantitative urine drug testing is not recommended for verifying compliance without evidence of necessity. In this case, there was no documentation that quantitative urine drug testing was ordered or requested on 2/13/2015. There was also no documentation of medical necessity for quantitative urine drug testing. Medical necessity for the requested test was not established. The requested test was not medically necessary.

Retrospective Quantitative Urine Drug Screen DOS 8/28/14: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Drug testing, Opioids (Classification).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Drug testing. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Urine Drug Testing.

Decision rationale: According to CA MTUS (2009), a urine drug screen is recommended as an option to assess for the use or the presence of illegal drugs. According to ODG, urine drug testing (UDT) is a recommended tool to monitor compliance with prescribed substances, identify use of undisclosed substances, and uncover diversion of prescribed substances. There is currently no way to tell from a UDT the exact amount of drug ingested or taken, when the last dose was taken, or the source of the drug. Quantitative urine drug testing is not recommended for verifying compliance without evidence of necessity. In this case, there was no documentation that quantitative urine drug testing was ordered or requested on 8/28/2014. There was also no documentation of medical necessity for quantitative urine drug testing. Medical necessity for the requested test was not established. The requested test was not medically necessary.

Retrospective Quantitative Urine Drug Screen DOS 7/24/14: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Drug testing, Opioids (Classification).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Drug testing. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Urine Drug Testing.

Decision rationale: According to CA MTUS (2009), a urine drug screen is recommended as an option to assess for the use or the presence of illegal drugs. According to ODG, urine drug testing (UDT) is a recommended tool to monitor compliance with prescribed substances, identify use of undisclosed substances, and uncover diversion of prescribed substances. There is currently no way to tell from a UDT the exact amount of drug ingested or taken, when the last dose was taken, or the source of the drug. Quantitative urine drug testing is not recommended for verifying compliance without evidence of necessity. In this case, there was no documentation that quantitative urine drug testing was ordered or requested on 7/24/2014. There was also no documentation of medical necessity for quantitative urine drug testing. Medical necessity for the requested test was not established. The requested test was not medically necessary.