

<b>Case Number:</b>	CM15-0200296		
<b>Date Assigned:</b>	10/15/2015	<b>Date of Injury:</b>	11/05/2014
<b>Decision Date:</b>	12/02/2015	<b>UR Denial Date:</b>	09/16/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/13/2015

### 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 represented 54-year-old who has filed a claim for chronic hip and thigh pain reportedly associated with an industrial injury of November 5, 2014. In a Utilization Review report dated September 16, 2015, the claims administrator failed to approve a request for urine toxicology testing (AKA urine drug testing) apparently performed on or around August 10, 2015. The applicant's attorney subsequently appealed. On August 10, 2015, the applicant reported ongoing complaints of hip, thigh, and leg pain status post earlier hamstring repair surgery of December 23, 2014. The applicant was working on a part-time basis, at a rate of four hours a day, the treating provider reported. Continued strengthening and stretching exercises were endorsed. The applicant's medications were not seemingly discussed or detailed. The note was thinly and sparsely developed and did not seemingly make explicit mention of the need for drug testing. In a separate note dated August 10, 2015, drug testing was performed. The applicant's BMI was 35, it was reported. The applicant's medication list included Naprosyn and enalapril, it was reported. It was not stated when the applicant was last tested. In one section of the note, it was stated the applicant was working on part-time basis while another section of the note stated that the applicant was receiving temporary disability benefits. The note, thus, was at times internally inconsistent.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Retrospective request for Urine toxicology Screening DOS 08/10/2015: Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Opioids, criteria for use.

**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) Pain (Chronic), Urine drug testing (UDT).

**Decision rationale:** No, the request for urine toxicology screening (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 a drug testing as an option in the chronic pain population, to assess for the presence or absence of illegal 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 attach an applicant's complete medication list to the request for authorization for testing, eschew confirmatory and quantitative testing outside of the emergency department drug overdose context, clearly state which drug tests and/or drug panels he intends to test for, attempt to conform to the best practice of United States Department of Transportation (DOT) when performing drug testing, and attempt to categorize the applicants into higher-or lower-risk categories for whom more or less frequent drug testing would be indicated. Here, however, there was no mention of when applicant was last drug tested. There was no mention of the applicant's being a higher or lower-risk individual for whom more or less frequent drug testing would have been indicated. The attending provider neither signal his intention to eschew confirmatory or quantitative testing nor signaled his intention to conform to the best practice of the United States Department of Transportation (DOT) when performing drug testing here. Since multiple ODG criteria for drug testing were not seemingly met, the request was not indicated. Therefore, the request is not medically necessary.