

Case Number:	CM15-0047678		
Date Assigned:	03/19/2015	Date of Injury:	09/10/2008
Decision Date:	04/24/2015	UR Denial Date:	02/26/2015
Priority:	Standard	Application Received:	03/13/2015

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: California, Indiana, New York
Certification(s)/Specialty: Internal 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 injured worker is a 63 year old female, who sustained an industrial injury on 09/10/2008. The injured worker was diagnosed as having lumbar disc degeneration and lumbar radiculopathy. Treatment to date has included MRI, medications, chiropractic care and physical therapy. According to a recent progress report, the injured worker complains of worsened low back pain with recurrence of radiculopathy symptoms. Treatment plan included continue use of TENS unit, change Robaxin to Flexeril, minimize use of Norco, change Voltaren to Clinoril and check urine toxicology as per Norco medication agreement.

IMR ISSUES, DECISIONS AND RATIONALES

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

Urine toxicology screening: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 41-42, 65, 76-80.

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

Decision rationale: Pursuant to the Chronic Pain Medical Treatment Guidelines and 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 is determined by whether the injured worker is a low risk, intermediate or high risk for drug misuse or abuse. Patients at low risk of addiction/aberrant behavior should be tested within six months of initiation of therapy and on a yearly basis thereafter. In this case, the injured worker's working diagnoses are lumbar disc degeneration; and lumbar radiculopathy. The documentation does not contain evidence of aberrant drug-related behavior, drug misuse or abuse. Utilization review physician had a peer-to-peer phone conference with the physician's assistant [REDACTED] noted in the utilization review dated February 25, 2015. The assistant stated the injured worker had a signed opiate contract but the injured worker was not presently taking Norco. [REDACTED] commented Norco had not been prescribed since June 2014. The progress note dated January 9, 2015 indicated the treating physician wanted to minimize Norco to one tablet per day. The treating physician wanted to check the urine drug screen pursuant to the Norco medication agreement. There was no risk assessment in the medical record to determine whether the injured worker was a low risk, intermediate or high risk for drug misuse or abuse. The presence of a Norco medication agreement, if the injured worker is not presently taking Norco and or there are no signs of aberrant drug-related behavior, misuse or abuse, is not a reasonable indication or rationale, by itself, for performing a urine drug toxicology screen. There were no past urine drug screens available for review in the medical record. Consequently absent compelling clinical documentation with drug-related behavior, drug misuse or abuse while minimizing the prescribed opiate (Norco), urine drug testing is not medically necessary.