

Case Number:	CM15-0051778		
Date Assigned:	03/25/2015	Date of Injury:	06/14/2013
Decision Date:	05/01/2015	UR Denial Date:	02/26/2015
Priority:	Standard	Application Received:	03/19/2015

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

Certification(s)/Specialty: Family Practice

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 43 year old female with an industrial injury dated June 14, 2013. The injured worker diagnoses include lumbar discogenic disease with bulging disc and cervical discogenic disease. She has been treated with diagnostic studies, prescribed medications and periodic follow up visits. According to the progress note dated 2/24/2015, the injured worker reported neck pain and numbness and tingling in hand. The treating physician noted that the cervical magnetic resonance imaging (MRI) revealed bulging disk at C4-C5 and C5-C6 with encroachment of C5-C6. The treating physician also noted that the physical exam was unchanged from 1/13/2015. The treating physician prescribed a retrospective request for dates of service 01/13/15 for active-medicated specimen collection kit.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective (DOS: 01/13/15) Active-medicated specimen collection kit: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug Testing, Opioids. Decision based on Non-MTUS Citation <http://www.healthcare-physician-prescription-dispensing-md-cg.com>.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug Testing Page(s): 43.

Decision rationale: The MTUS/Chronic Pain Medical Treatment Guidelines comment on the use of drug testing for patients on controlled substances. These guidelines state the following: Recommended as an option, using a urine drug screen to assess for the use or the presence of illegal drugs. For more information, see Opioids, criteria for use: (2) Steps to Take Before a Therapeutic Trial of Opioids & (4) On-Going Management; Opioids, differentiation: dependence & addiction; Opioids, screening for risk of addiction (tests); & Opioids, steps to avoid misuse/addiction. In this case, the records indicate that the patient has undergone a series of urine drug tests; many of which have demonstrated inconsistent results; specifically, that the medications that the patient was presumed to be taking were not detected or the results detected the presence of other drugs. There is no documentation in the available records of the action taken by the prescribing physician in the face of inconsistent urine drug testing. This would be expected; per the MTUS guidelines. Further, there is no rationale provided as to the need for this specific type of urine drug testing kit. The Active-Medicated Specimen Collection Kit is a urine drug testing kit that contains one 20mg furosemide tablet. Furosemide is a potent diuretic that has no value in the assessment of a urine drug test. In summary, there is insufficient documentation in the available records as to the action taken by the treating physician in response to inconsistent urine drug test results. Further, there is no rationale provided as to the necessity of adding furosemide to the urine drug test methodology. Therefore, an Active-Medicated Specimen Collection Kit is not medically necessary.