

Case Number:	CM14-0101966		
Date Assigned:	09/16/2014	Date of Injury:	06/30/2011
Decision Date:	10/31/2014	UR Denial Date:	05/28/2014
Priority:	Standard	Application Received:	07/02/2014

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. The expert reviewer is Board Certified in Internal Medicine, has a subspecialty in Pulmonary Diseases and is licensed to practice in California. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

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 48-year-old male who reported an injury after having been involved in a fight on 06/30/2011. On 06/26/2014, his diagnoses included back ache unspecified, lumbosacral radiculopathy, and lumbosacral spondylosis without myelopathy. His medications included Norco 10/325 mg, Ultram 50 mg, and cyclobenzaprine 7.5 mg. The tramadol was being discontinued because it made him hyper. He was starting a trial of Lyrica 50 mg. On 04/30/2014, he had undergone a lumbar interbody fusion. There was no rationale or Request for Authorization included in this injured worker's chart.

IMR ISSUES, DECISIONS AND RATIONALES

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

TESTING: GENETIC METABOLISM TEST: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITY GUIDELINES

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Pain, Genetic testing for potential opioid abuse.

Decision rationale: The request for TESTING: GENETIC METABOLISM TEST is not medically necessary. The Official Disability Guidelines do not recommend genetic testing.

While there appears to be a strong genetic component to addictive behavior, current research is experimental in terms of testing for this. Studies are inconsistent, with inadequate statistics in a large phenotype range. More work is needed to verify the role of variants suggested to be associated with addiction and for a clearer understanding of their role in different populations. Genetic testing is not supported by the guidelines. Therefore, the request for TESTING: GENETIC METABOLISM TEST is not medically necessary.

GENETIC OPIOID RISK TEST: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITY GUIDELINES

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Pain, Genetic testing for potential opioid abuse.

Decision rationale: The request for GENETIC OPIOID RISK TEST is not medically necessary. The Official Disability Guidelines do not recommend genetic testing. While there appears to be a strong genetic component to addictive behavior, current research is experimental in terms of testing for this. Studies are inconsistent, with inadequate statistics in a large phenotype range. More work is needed to verify the role of variants suggested to be associated with addiction and for a clearer understanding of their role in different populations. Genetic testing is not supported by the guidelines. Therefore, the request for GENETIC OPIOID RISK TEST is not medically necessary.