

<b>Case Number:</b>	CM14-0138934		
<b>Date Assigned:</b>	09/10/2014	<b>Date of Injury:</b>	05/08/2013
<b>Decision Date:</b>	10/07/2014	<b>UR Denial Date:</b>	07/29/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/27/2014

### 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 Occupational Medicine and is licensed to practice in Texas. 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:

This injured worker was involved in a work related injury from 5/8/13. The injured worker fell sustaining multiple musculoskeletal injuries. The injured worker had headaches, lumbar pain and shoulder pain, as well. Request had been made for a Deoxyribonucleic acid (DNA) collection kit to assess potential for opioid abuse.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**An advanced DNA medicated collection kit:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines - TWC Pain Procedure Summary, last updated 6/10/14;  
<http://learn.genetics.utah.edu/content/addiction/genetics/>

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

**Decision rationale:** The request is made for a Deoxyribonucleic acid test to see if the worker is at an increased risk of opioid abuse. This testing would be considered investigational at this point, and is not recommended for regular use and not supported by the guidelines, as noted: Not

recommended. 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 and large phenotype range. Different studies use different criteria for definition of controls. More work is needed to verify the role of variants suggested to be associated with addiction and for clearer understanding of their role in different populations (Levrán, 2012). The treating provider has not included anything new or different in support of this request. Given the available clinical information and the available clinical guidelines, there is no data to support the appropriateness or indication for this testing. The testing is not medically necessary.