

<b>Case Number:</b>	CM14-0166050		
<b>Date Assigned:</b>	10/13/2014	<b>Date of Injury:</b>	11/09/2011
<b>Decision Date:</b>	11/13/2014	<b>UR Denial Date:</b>	10/03/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/08/2014

### 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 Physical Medicine & Rehabilitation, 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 patient is a 47-year-old male who sustained an industrial injury on November 9, 2011. At the time of the injury to patient was working as a food clerk at which time he stepped on the ledge of a ladder and fell. He sustained injuries to his low back, left knee and left ankle. The patient underwent left the anterior cruciate ligament reconstruction on April 3, 2012. He underwent anterior lumbar interbody fusion on April 1, 2014. The medical records indicate that the patient underwent urine drug testing in March 2014 consistent with tramadol. The medical records also indicate that the patient has undergone drug screening in September 2013 and December 2013. The patient was seen on September 3, 2014 at which time he reported improvement with regards to his low back. He continues to require tramadol. The report notes that the patient is being evaluated for medication management and therapy. Qualitative 12 panel urine drug test was administered. Utilization review was performed October 3, 2014 at which time the request for urine drug screen collected on September 3, 2014 was retrospectively noncertified. The prior peer reviewer noted that the patient would be considered to be at low risk for addiction/aberrant behavior related to opioid therapy. The prior peer review noted that the recommended frequency of urine drug screening would be once a year. However, the September 3, 2014 did not document the presence of any adverse drug related behaviors or suspicious of drug misuse or illicit drug use. The prior peer reviewer also noted that the results of prior urine drug screen testing are not acknowledged.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Retrospective Urine Drug Screen collected 09/03/2014:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 43, 76-78. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Treatment in Workers' Compensation, 12th Edition, 2014, Pain Chapter

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Drug Test, Opioids Criteria for use Page(s): 43,75-78. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) ,Pain Chapter, UDT

**Decision rationale:** The CA MTUS chronic pain medical treatment guidelines recommend the use of drug screening for patients with issues of abuse, addiction, or poor pain control. A review of the medical records does not establish that is the case with this patient. ODG with regards to urine drug testing states that 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 medical records indicate that the patient is undergoing frequent urine drug testing. There is indication that urine drug testing in March 2014 was consistent. Urine Drug Screen collected 09/03/2014 would not have been medically necessary.