

<b>Case Number:</b>	CM14-0214805		
<b>Date Assigned:</b>	02/04/2015	<b>Date of Injury:</b>	10/01/2012
<b>Decision Date:</b>	03/24/2015	<b>UR Denial Date:</b>	11/21/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	12/23/2014

### 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. 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: New York, Pennsylvania, Washington  
 Certification(s)/Specialty: Internal Medicine, Geriatric 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 45 year old male, who sustained an industrial injury on 10/1/2012. On 12/23/14, the injured worker submitted an application for IMR for review of Retrospective Opiate(s), drug and metabolites x 12 (DOS 7-30-14), and Retrospective Amphetamine or methamphetamine x 3 (DOS 7-30-14), and Retrospective Benzodiazepines x 6 (DOS 7-30-14) and Retrospective Cocaine or metabolite (DOS 7-30-14) and Retrospective Phenylelidine x 1 (DOS 7-30-14) and Retrospective Dihydrocodeinone x 1 (DOS 7-30-14) and Retrospective Methadone x 1 (DOS 7-30-14) and Retrospective Quant single stationary and mobile x 1 (DOS 7-30-14) and Retrospective Gabapentin x 1 (DOS 7-30-14) and Retrospective Meptobamate x 1 (DOS 7-30-14) and Retrospective Nortriptyline x 1 (DOS 7-30-14). The treating provider has reported the injured worker complained of lower back pain that is described as constant and daily. The diagnoses have included lumbar degenerative disc, discogenic low back pain and left L4 radiculitis. Treatment to date has included MRI Lumbar (10/18/12 and 4/15/13), EMG/NCS Bilateral Upper Extremities (5/13/13), left L4 selective epidural steroid injections; epidurography. On 11/21/14 Utilization Review non-certified Retrospective Opiate(s), drug and metabolites x 12 (DOS 7-30-14), and Retrospective Amphetamine or methamphetamine x 3 (DOS 7-30-14), and Retrospective Benzodiazepines x 6 (DOS 7-30-14) and Retrospective Cocaine or metabolite (DOS 7-30-14) and Retrospective Phenylelidine x 1 (DOS 7-30-14) and Retrospective Dihydrocodeinone x 1 (DOS 7-30-14) and Retrospective Methadone x 1 (DOS 7-30-14) and Retrospective Quant single stationary and mobile x 1 (DOS 7-30-14) and

Retrospective Gabapentin x 1 (DOS 7-30-14) and Retrospective Meptobamate x 1 (DOS 7-30-14) and Retrospective Nortriptyline x 1 (DOS 7-30-14). The MTUS Guidelines were cited.

### **IMR ISSUES, DECISIONS AND RATIONALES**

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

#### **Retrospective Opiate(s), drug and metabolites x 12 (DOS 7-30-14): Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines 9792.20 - 9792.26 Page(s): 43, 77, 78.

**Decision rationale:** This injured worker has a history of chronic pain since 2012. The worker has had various treatment modalities and use of medications including opioids. His current medications included venlafexine, hydrocodone and gabapentin. Per the guidelines, urine drug screening may be used at the initiation of opioid use for pain management and in those individuals with issues of abuse, addiction or poor pain control. In the case of this injured workers, prior drug screening in 5/14 has confirmed the use of prescribed medications. He also completed an opioid risk tool on 5/21/14 with a score of 2 showing low risk. The records fail to document any issues of abuse or addiction or the medical necessity of a repeat drug screen. The medical necessity of a urine drug screen for Retrospective Opiate(s), drug and metabolites x 12 (DOS 7-30-14) is not substantiated in the records.

#### **Retrospective Amphetamine or methamphetamine x 3 (DOS 7-30-14): Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines 9792.20 - 9792.26 Page(s): 43, 77, 78.

**Decision rationale:** This injured worker has a history of chronic pain since 2012. The worker has had various treatment modalities and use of medications including opioids. His current medications included venlafexine, hydrocodone and gabapentin. Per the guidelines, urine drug screening may be used at the initiation of opioid use for pain management and in those individuals with issues of abuse, addiction or poor pain control. In the case of this injured workers, prior drug screening in 5/14 has confirmed the use of prescribed medications. He also completed an opioid risk tool on 5/21/14 with a score of 2 showing low risk. The records fail to document any issues of abuse or addiction or the medical necessity of a repeat drug screen. The medical necessity of a urine drug screen for Retrospective Amphetamine or methamphetamine x 3 (DOS 7-30-14) is not substantiated in the records.

#### **Retrospective Benzodiazepines x 6 (DOS 7-30-14): Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines 9792.20 - 9792.26 Page(s): 43, 77, 78.

**Decision rationale:** This injured worker has a history of chronic pain since 2012. The worker has had various treatment modalities and use of medications including opioids. His current medications included venlafexine, hydrocodone and gabapentin. Per the guidelines, urine drug screening may be used at the initiation of opiod use for pain management and in those individuals with issues of abuse, addiction or poor pain control. In the case of this injured workers, prior drug screening in 5/14 has confirmed the use of prescribed medications. He also completed an opiod risk tool on 5/21/14 with a score of 2 showing low risk. The records fail to document any issues of abuse or addiction or the medical necessity of a repeat drug screen. The medical necessity of a urine drug screen for Retrospective Benzodiazepines x 6 (DOS 7-30-14) is not substantiated in the records.

**Retrospective Cocaine or metabolite (DOS 7-30-14): Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines 9792.20 - 9792.26 Page(s): 43, 77, 78.

**Decision rationale:** This injured worker has a history of chronic pain since 2012. The worker has had various treatment modalities and use of medications including opioids. His current medications included venlafexine, hydrocodone and gabapentin. Per the guidelines, urine drug screening may be used at the initiation of opiod use for pain management and in those individuals with issues of abuse, addiction or poor pain control. In the case of this injured workers, prior drug screening in 5/14 has confirmed the use of prescribed medications. He also completed an opiod risk tool on 5/21/14 with a score of 2 showing low risk. The records fail to document any issues of abuse or addiction or the medical necessity of a repeat drug screen. The medical necessity of a urine drug screen for Retrospective Cocaine or metabolite (DOS 7-30-14) is not substantiated in the records.

**Retrospective Pheneyelidine x 1 (DOS 7-30-14): Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines 9792.20 - 9792.26 Page(s): 43, 77, 78.

**Decision rationale:** This injured worker has a history of chronic pain since 2012. The worker has had various treatment modalities and use of medications including opioids. His current

medications included venlafexine, hydrocodone and gabapentin. Per the guidelines, urine drug screening may be used at the initiation of opioid use for pain management and in those individuals with issues of abuse, addiction or poor pain control. In the case of this injured workers, prior drug screening in 5/14 has confirmed the use of prescribed medications. He also completed an opioid risk tool on 5/21/14 with a score of 2 showing low risk. The records fail to document any issues of abuse or addiction or the medical necessity of a repeat drug screen. The medical necessity of a urine drug screen for Retrospective Phenylelidine x 1 (DOS 7-30-14) is not substantiated in the records.

**Retrospective Dihydrocodeinone x 1 (DOS 7-30-14): Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines 9792.20 - 9792.26 Page(s): 43, 77, 78.

**Decision rationale:** This injured worker has a history of chronic pain since 2012. The worker has had various treatment modalities and use of medications including opioids. His current medications included venlafexine, hydrocodone and gabapentin. Per the guidelines, urine drug screening may be used at the initiation of opioid use for pain management and in those individuals with issues of abuse, addiction or poor pain control. In the case of this injured workers, prior drug screening in 5/14 has confirmed the use of prescribed medications. He also completed an opioid risk tool on 5/21/14 with a score of 2 showing low risk. The records fail to document any issues of abuse or addiction or the medical necessity of a repeat drug screen. The medical necessity of a urine drug screen for Retrospective Dihydrocodeinone x 1 (DOS 7-30-14) is not substantiated in the records.

**Retrospective Methadone x 1 (DOS 7-30-14): Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines 9792.20 - 9792.26 Page(s): 43, 77, 78.

**Decision rationale:** This injured worker has a history of chronic pain since 2012. The worker has had various treatment modalities and use of medications including opioids. His current medications included venlafexine, hydrocodone and gabapentin. Per the guidelines, urine drug screening may be used at the initiation of opioid use for pain management and in those individuals with issues of abuse, addiction or poor pain control. In the case of this injured workers, prior drug screening in 5/14 has confirmed the use of prescribed medications. He also completed an opioid risk tool on 5/21/14 with a score of 2 showing low risk. The records fail to document any issues of abuse or addiction or the medical necessity of a repeat drug screen. The medical necessity of a urine drug screen for Retrospective Methadone x 1 (DOS 7-30-14) is not substantiated in the records.

**Retrospective Quant single stationary and mobile x 1 (DOS 7-30-14): Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines 9792.20 - 9792.26 Page(s): 43, 77, 78.

**Decision rationale:** This injured worker has a history of chronic pain since 2012. The worker has had various treatment modalities and use of medications including opioids. His current medications included venlafexine, hydrocodone and gabapentin. Per the guidelines, urine drug screening may be used at the initiation of opioid use for pain management and in those individuals with issues of abuse, addiction or poor pain control. In the case of this injured workers, prior drug screening in 5/14 has confirmed the use of prescribed medications. He also completed an opioid risk tool on 5/21/14 with a score of 2 showing low risk. The records fail to document any issues of abuse or addiction or the medical necessity of a repeat drug screen. The medical necessity of a urine drug screen for Retrospective Quant single stationary and mobile x 1 (DOS 7-30-14) is not substantiated in the records.

**Retrospective Gabapentin x 1 (DOS 7-30-14): Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines 9792.20 - 9792.26 Page(s): 43, 77, 78.

**Decision rationale:** This injured worker has a history of chronic pain since 2012. The worker has had various treatment modalities and use of medications including opioids. His current medications included venlafexine, hydrocodone and gabapentin. Per the guidelines, urine drug screening may be used at the initiation of opioid use for pain management and in those individuals with issues of abuse, addiction or poor pain control. In the case of this injured workers, prior drug screening in 5/14 has confirmed the use of prescribed medications. He also completed an opioid risk tool on 5/21/14 with a score of 2 showing low risk. The records fail to document any issues of abuse or addiction or the medical necessity of a repeat drug screen. The medical necessity of a urine drug screen for Retrospective Gabapentin x 1 (DOS 7-30-14) is not substantiated in the records.

**Retrospective Meptobamate x 1 (DOS 7-30-14): Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines 9792.20 - 9792.26 Page(s): 43, 77, 78.

**Decision rationale:** This injured worker has a history of chronic pain since 2012. The worker has had various treatment modalities and use of medications including opioids. His current medications included venlafexine, hydrocodone and gabapentin. Per the guidelines, urine drug screening may be used at the initiation of opiod use for pain management and in those individuals with issues of abuse, addiction or poor pain control. In the case of this injured workers, prior drug screening in 5/14 has confirmed the use of prescribed medications. He also completed an opiod risk tool on 5/21/14 with a score of 2 showing low risk. The records fail to document any issues of abuse or addiction or the medical necessity of a repeat drug screen. The medical necessity of a urine drug screen for Retrospective Meptobamate x 1 (DOS 7-30-14) is not substantiated in the records.

**Retrospective Nortriptyline x 1 (DOS 7-30-14): Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines 9792.20 - 9792.26 Page(s): 43, 77, 78.

**Decision rationale:** This injured worker has a history of chronic pain since 2012. The worker has had various treatment modalities and use of medications including opioids. His current medications included venlafexine, hydrocodone and gabapentin. Per the guidelines, urine drug screening may be used at the initiation of opiod use for pain management and in those individuals with issues of abuse, addiction or poor pain control. In the case of this injured workers, prior drug screening in 5/14 has confirmed the use of prescribed medications. He also completed an opiod risk tool on 5/21/14 with a score of 2 showing low risk. The records fail to document any issues of abuse or addiction or the medical necessity of a repeat drug screen. The medical necessity of a urine drug screen for Retrospective Nortriptyline x 1 (DOS 7-30-14) is not substantiated in the records.