

Case Number:	CM15-0113897		
Date Assigned:	06/24/2015	Date of Injury:	02/03/2014
Decision Date:	07/29/2015	UR Denial Date:	05/20/2015
Priority:	Standard	Application Received:	06/12/2015

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: Texas, 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 64 year old female who sustained an industrial injury on 02/03/14. Initial complaints and diagnoses are not available. Treatments to date include medications and left knee surgery. Diagnostic studies are not addressed. Current complaints include pain in the neck, low back, right hand and wrist, and bilateral knees. Current diagnoses include myoligamentous strain of the cervical and lumbar spine, inflammatory process of the right wrist and left knee. In a progress note dated 03/03/15 the treating provider reports the plan of care as surgical consultation for the left knee and ankle, right wrist brace, genetic testing for prescription drug metabolism, and a neurology consultation for electrodiagnostic studies. The requested treatments include a wrist brace and genetic testing for prescription drug metabolism. The current medication list was not specified in the records provided. A recent detailed urine drug screen report was not specified in the records provided.

IMR ISSUES, DECISIONS AND RATIONALES

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

Genetic Testing for Prescription Drug Metabolism to Aid in Proper Dosing and Assessment of Dependency, Tolerance, Effectiveness or Misuse: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines California Medical Treatment Utilization Schedule (MTUS), 2010, Chronic pain treatment guidelines Page 43 Drug testing. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Chapter: Pain updated 5/15/14 Genetic testing for potential opioid abuse.

Decision rationale: Per the ODG cited below genetic testing is "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)." Therefore, there is no high- grade scientific evidence to support the use of genetic testing for assessment of opioid abuse. A detailed history documenting that this pt has a previous history of abuse of controlled substances or is at a high risk for abusing controlled substances is not specified in the records provided. Rationale for Genetic drug metabolism test and Genetic testing for Narcotic risk is not specified in the records provided. Exact genetic factors that would be covered during the proposed testing are not specified in the records provided. The current medication list was not specified in the records provided. A recent detailed report of a Urine toxicology study was not specified in the records provided. Genetic Testing for Prescription Drug Metabolism to Aid in Proper Dosing and Assessment of Dependency is not medically necessary for this patient.