

<b>Case Number:</b>	CM15-0175887		
<b>Date Assigned:</b>	09/17/2015	<b>Date of Injury:</b>	10/29/2010
<b>Decision Date:</b>	10/26/2015	<b>UR Denial Date:</b>	09/01/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/08/2015

### 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, New York, California  
 Certification(s)/Specialty: Preventive Medicine, Occupational 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 applicant is a represented [REDACTED] beneficiary who has filed a claim for chronic hand, wrist, low back, and shoulder pain reportedly associated with an industrial injury of October 29, 2010. In a Utilization Review report dated September 1, 2015, the claims administrator failed to approve a request for urine drug screen. The claims administrator referenced an RFA form received on August 20, 2015 and an associated progress note of August 19, 2015 in its determination. The applicant's attorney subsequently appealed. In a letter dated September 10, 2015, the applicant's treating provider also appealed the denial stating the applicant was using Norco for pain relief. The applicant was described as an intermediate risk individual. The treating provider did not seemingly state when the applicant had last been tested, however. On August 19, 2015, the applicant reported ongoing complaints of shoulder and wrist pain. The applicant was using Norco for pain relief. The applicant was using omeprazole and Naprosyn, it was reported in another section of the note. Multiple medications were renewed. Drug testing was sought. The applicant's work status was not reported, although it did not appear that the applicant was working. Drug testing performed on August 19, 2015 was reviewed and did include testing for multiple different opioid metabolites, cooking, benzodiazepines, barbiturates, and amphetamines. Said drug testing was negative for all items in panel, it was reported. It was not, however, clearly stated when the applicant was last tested.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Urine drug screen:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Drug testing. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain (Chronic), Urine drug testing (UDT).

**Decision rationale:** No, the request for a urine drug screen performed on August 19, 2015 was not medically necessary, medically appropriate, or indicated here. While page 43 of the MTUS Chronic Pain Medical Treatment Guidelines does recommend that drug testing as an option to assess for the presence or absence of illegal drugs, the MTUS does not establish specific parameters for or identify a frequency with which to perform drug testing. ODG's Chronic Pain Chapter Urine Drug Testing topic, however, stipulate that an attending provider should incorporate the results of testing and interpretation in the applicant's chart to document compliance or deviation. Here, the applicant tested negative for all items on the panel, including opioids, it was reported on said drug testing of August 19, 2015. The negative opioid test results were seemingly incompatible with fact that the applicant was reportedly using Norco, an opioid agent on twice daily basis, the treating provider suggested on an appeal letter dated September 10, 2015. The treating provider failed to discuss the unexpectedly negative test results in his September 10, 2015 appeal letter. Therefore, the request was not medically necessary.