

Case Number:	CM13-0017809		
Date Assigned:	10/11/2013	Date of Injury:	12/27/2002
Decision Date:	01/02/2014	UR Denial Date:	07/26/2013
Priority:	Standard	Application Received:	08/28/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Physical Medicine & Rehabilitation, has a subspecialty in Interventional Spine 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 physician 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.

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 34 year old male with an injury from 8/24/98 while carrying a large piece of pipe when he slipped. He suffers from chronic neck pain. The request is for facet joint radiofrequency (RF) ablation of the left side at C4-5 and C6-7. The patient has had cervical fusion at C5-6. This request was denied on 7/26/13, citing lack of the duration of relief and amount of relief from prior procedure which was performed on October 2012.

IMR ISSUES, DECISIONS AND RATIONALES

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

The RF facet joint injection to the left C4 and C6 vertebrae.: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Neck and Upper Back Chapter.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints, Chapter 12 Low Back Complaints. Decision based on Non-MTUS Citation ODG, Cervical Spine RF Facet Ablation.

Decision rationale: The repeat RFA procedure requested on 7/22/13 is in accordance with MTUS/ACOEM chapter guidelines and the ODG guidelines. ODG guidelines state RFA should not be performed at an interval less than 6-months from the first procedure, and there should be at least 50% improvement for 12 weeks and sustained relief should be about 6 months. The

employee saw Dr Salazar on 10/1/13 and had 8/10 neck pain. The employee underwent left C4 and C6 RFA on 10/10/12 and right C4 and C6 on 10/24/12. The employee had 75-80% improvement in headaches and neck pain by 1/19/13, when the pain was rated at 2/10. The employee continued to have relief until 4/16/13, when Dr Wlasichuk noted the neck symptoms were starting to return and become more bothersome. Dr Wlasichuk suggested repeating the RFA on 7/22/13. The employee has been reported to use less medication and had pain score go from 8/10 to 2/10. The request for the RF facet joint injection is medically necessary and appropriate.