

Case Number:	CM13-0024195		
Date Assigned:	12/11/2013	Date of Injury:	04/26/2004
Decision Date:	02/10/2014	UR Denial Date:	09/04/2013
Priority:	Standard	Application Received:	09/13/2013

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 and Rehabilitation, has a subspecialty in Pain Management 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. 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:

This is a male patient with a date of injury of April 26, 2004. A utilization review determination dated September 4, 2013 recommends noncertification of Botox injections for date of service August 2, 2013. A progress report dated August 2, 2013 identifies a subjective complaints indicating that the patient has severe TMJ pain that is not relieved with conservative treatment. He presents for Botox injections. The note also indicates the patient has daily headaches which radiate to the entire forehead with pain rated as a 6-7/10. Physical examination identifies no abnormalities. The patient was injected with Botox 25 units at the masseter, 20 units at the temporalities, and 10 units in the forehead. Treatment plan states, "will need to request additional Botox for the treatment of headache." A progress report dated October 14, 2013 indicates that the patient did not notice any significant improvement in the temporomandibular joint as well as the cervical spine. Physical examination identifies tenderness on the right temporomandibular joint on deep palpation. Cervical spine range of motion is normal. A progress report dated June 24, 2013 includes objective findings indicating that the patient is continuing to have right-sided TMJ problems and slight tenderness as noted on the right TMJ with the palpation. Diagnoses include cervical strain, cervicogenic headaches, temporomandibular joint syndrome, anxiety and stress, right maxillary sinusitis, social phobia, and possible gastritis. Treatment plan recommends orthodontist consultation, physical therapy for TMJ dysfunction, urine tox screen, Lunesta, Xanax, Prilosec, Cymbalta, Motrin, and follow-up as needed.

IMR ISSUES, DECISIONS AND RATIONALES

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

The retrospective request for four (4) Botox Injections for date of service 8/02/2013:
Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Section on Botulinum toxin (Botox; Myobloc), Page(s): 25-26.

Decision rationale: Guidelines, Section on Botulinum toxin (Botox; Myobloc), pgs 25-26. The Physician Reviewer's decision rationale: Regarding the request for botulinum toxin, Chronic Pain Treatment Guidelines state that botulinum toxin is not generally recommended for chronic pain disorders, but recommended for cervical dystonia. Guidelines go on to state specifically that botulinum is, "not recommended for the following: tension-type headache; migraine headache; fibromyositis; chronic neck pain; myofascial pain syndrome; and trigger point injections." Within the documentation available for review, the requesting physician has suggested that the botulinum toxin will be injected for the patients TMJ condition. Chronic Pain Medical Treatment Guidelines do not support the use of botulinum for the treatment of TMJ disorders. Therefore, in the absence of guideline support for the use of botox in the treatment of TMJ disorders, the currently requested botulinum toxin is not medically necessary.