

<b>Case Number:</b>	CM13-0024298		
<b>Date Assigned:</b>	11/20/2013	<b>Date of Injury:</b>	09/05/1991
<b>Decision Date:</b>	02/04/2014	<b>UR Denial Date:</b>	08/16/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	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 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 66-year-old male who reported an injury on 09/05/1991 while lifting an undisclosed amount of weight. On 07/17/2013, the patient returned for a follow-up after a left-sided facet block at C6-7 and C7-T1, which was reportedly under a prior fusion level at C5-6. The patient reported that the left-sided facet blocks of the cervical spine helped for approximately 4 days, but the pain relief was in the lower cervical spine and did not help his upper neck pain. The most recent clinical date of 09/23/2013 noted that the patient was seen for his ongoing neck pain with numbness to the bilateral hands. The patient stated that he also had ongoing low back pain. At the time of the exam, the patient had been denied authorization for the recommended facet block from C2-3 on the left, facet blocks from C6-T1 bilaterally and facet blocks from L3-S1 bilaterally. At that time, the patient was advised to discuss his options and was encouraged to continue with conservative care and a home exercise program as tolerated. The physician was requesting at this time cervical medial branch/facet blocks at C2-3 bilaterally.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Cervical medial branch/facet blocks at C2-3 bilaterally:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 175. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Neck and Upper Back Chapter, Facet joint diagnostic blocks

**Decision rationale:** Under the California MTUS and ACOEM, it states that diagnostic facet joint blocks have no proven benefit in treating acute neck and upper back symptoms. It does further state that, however, many pain physicians believe that diagnostic and/or therapeutic injections may help patients presenting in the transitional phase between acute and chronic pain. For further reference, the Official Disability Guidelines was referred to in this case. It stated that for facet joint diagnostic blocks, 1 set of diagnostic medial branch blocks is required with a response of greater than or equal to 70%. According to the documentation, the patient had facet injections and ablation certified by utilization review in 2012. However, there is no documentation providing the results of this previous treatment. Repeat facet injections are not indicated unless the previous treatment was documented to have been effective with objective measurements providing the efficacy. Given the lack of documented improvement, the repeat treatments cannot be medically supported at this time. Therefore, the requested service for a cervical medial branch/facet block at the C2-3 level bilaterally is non-certified