

Case Number:	CM13-0024720		
Date Assigned:	11/20/2013	Date of Injury:	08/26/2011
Decision Date:	01/14/2014	UR Denial Date:	09/03/2013
Priority:	Standard	Application Received:	09/16/2013

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 Occupational Medicine 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:

Patient is a male with DOB 5/13/1966 and a DOI of 8/26/2011. The patient fell 3ft off of a truck. Diagnosis include CTS, chronic pain syndrome, lumbar strain/low back pain, lumbar facet syndrome, lumbosacral radiculopathy, knee pain/sprain. Patient has had treatment with PT and medications. The patient had prior lumbar facet blocks in the past and is now having increasing symptoms. EMG/NCS on 7/2013 were normal. MRI on 11/1/11 showed mild L4-5 facet arthropathy. There is a request for medical branch block right lumbar, without a level of injection noted.

IMR ISSUES, DECISIONS AND RATIONALES

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

Right lumbar medial branch block: Upheld

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 300, 309.

Decision rationale: The low back chapter of ACOEM does not recommend facet blocks stating they are of questionable merit. This patient had a facet block already which was not helpful as per Final Determination Letter for IMR Case Number [REDACTED] July 31, 2013 PQME re-

evaluation. EMG/NCS studies in 7/2013 were normal and do not show facet nerve issues. Finally, because MTUS does not recommend facet block injections, this treatment is therefore not medically necessary.