

<b>Case Number:</b>	CM13-0035671		
<b>Date Assigned:</b>	12/13/2013	<b>Date of Injury:</b>	08/13/2004
<b>Decision Date:</b>	10/29/2014	<b>UR Denial Date:</b>	10/07/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/17/2013

### 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. The expert reviewer is Board Certified in Internal Medicine, has a subspecialty in Rheumatology and is licensed to practice in Maryland. 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/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:

The patient is a 58 year old female with date of injury 08/13/2004. The mechanism of injury is stated as falling into a hole and hurting her neck and back. The patient has complained of neck, back and head pain since the date of injury. She has been treated with physical therapy, facet joint blocks and medications. There are no radiographic data included for review. Objective: decreased and painful range of motion of the cervical and lumbar spines, decreased sensation to light touch in a C8 as well as L4-5 distribution, tenderness to palpation of the cervical and lumbar spine paraspinous musculature. Diagnoses: cervical spine disc disease, lumbar spine disc disease. Treatment plan and request: 1st level bilateral facet blocks, 2nd level bilateral facet blocks, 3rd level bilateral facet blocks.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**1st Level, Bilateral Facet Block, #2:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Neck and upper back complaints Page(s): 174-175.

**Decision rationale:** This 58 year old female has complained of neck, back and head pain since date of injury 8/13/2004. She has been treated with physical therapy, facet joint blocks and medications. The current request is for 1st level bilateral facet blocks. Per the MTUS guidelines cited above, invasive techniques (needle acupuncture and injection procedures such as injection of trigger points, facet joints or corticosteroids, Lidocaine or opioids in the epidural space) have no proven benefit in treating neck and upper back symptoms and are not recommended. On the basis of the above cited MTUS guidelines, 1st level bilateral facet blocks are not indicated as medically necessary.

**2nd Level, Bilateral Facet Block, #2: Upheld**

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Neck and upper back complaints Page(s): 174-175.

**Decision rationale:** This 58 year old female has complained of neck, back and head pain since date of injury 8/13/2004. She has been treated with physical therapy, facet joint blocks and medications. The current request is for 2nd level bilateral facet blocks. Per the MTUS guidelines cited above, invasive techniques (needle acupuncture and injection procedures such as injection of trigger points, facet joints or corticosteroids, Lidocaine or opioids in the epidural space) have no proven benefit in treating neck and upper back symptoms and are not recommended. On the basis of the above cited MTUS guidelines, 2nd level bilateral facet blocks are not indicated as medically necessary.

**3rd Level, Bilateral Facet Block, #2: Upheld**

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Neck and upper back complaints Page(s): 174-175.

**Decision rationale:** This 58 year old female has complained of neck, back and head pain since date of injury 8/13/2004. She has been treated with physical therapy, facet joint blocks and medications. The current request is for 3rd level bilateral facet blocks. Per the MTUS guidelines cited above, invasive techniques (needle acupuncture and injection procedures such as injection of trigger points, facet joints or corticosteroids, Lidocaine or opioids in the epidural space) have no proven benefit in treating neck and upper back symptoms and are not recommended. On the basis of the above cited MTUS guidelines, 3rd level bilateral facet blocks are not indicated as medically necessary.