

Case Number:	CM13-0051896		
Date Assigned:	12/27/2013	Date of Injury:	10/11/2007
Decision Date:	03/17/2014	UR Denial Date:	10/07/2013
Priority:	Standard	Application Received:	10/16/2013

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:

The applicant is a represented [REDACTED] employee who has filed a claim for neck, shoulder, and cervical brachial syndrome reportedly associated with an industrial injury of October 11, 2007. Thus far, the applicant has been treated with the following: analgesic medications; attorney representation; transfer of care to and from various providers in various specialties; unspecified amounts of chiropractic manipulative therapy; antidepressant medications for derivative depression; and extensive periods of time off of work. In a utilization review report of October 7, 2013, the claims administrator denied a request for cervical radiofrequency ablation procedures/medial branch blocks, citing non MTUS ODG Guidelines. The applicant's attorney subsequently appealed. In a December 28, 2013 progress note, the applicant acknowledges that his quality of sleep is poor. He states that his medications are working well. He has a pending court date, it is stated. He has cervical facet syndrome and exhibits tenderness over the cervical paraspinal muscles with upper extremity strength ranging from 4-5/5. There is some evidence of decreased sensorium about the C5 and C6 dermatomes. Home exercises and psychotherapy are endorsed. Epidural steroid injection therapy is sought on this date. In a January 10, 2013 progress note, it is stated the applicant is "permanently disabled." On September 5, 2013, the applicant presented with headaches, neck pain, and low back pain, which he attributed to the industrial injury. He rated the same at 9/10. He was described as having limited cervical range of motion and facetogenic tenderness with 5/5 grip strength appreciated. Cervical medial branch blocks were sought, along with neuropsychological testing. The applicant was given a prescription for Paxil.

IMR ISSUES, DECISIONS AND RATIONALES

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

Injection, anesthetic agent and/or steroid, paravertebral facet joint or facet joint nervece; lumbar or acral, single level: Upheld

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints.

Decision rationale: As noted in the MTUS-adopted ACOEM Guidelines, facet injections of corticosteroids and diagnostic facet blocks, which are being proposed here, are "not recommended." It is noted that the applicant has had prior cervical facet joint procedures, despite the unfavorable ACOEM recommendation and has failed to achieve any lasting benefit or functional improvement through prior usage of the same. The applicant remains off of work. The applicant remains highly reliant on various analgesic and psychotropic medications. It is further noted that the applicant's concurrent pursuit of epidural steroid injection therapy and facet joint blocks implies a lack of diagnostic clarity. Therefore, the request is not certified, for all of the stated reasons.