

Case Number:	CM14-0107869		
Date Assigned:	08/01/2014	Date of Injury:	09/16/2010
Decision Date:	10/07/2014	UR Denial Date:	06/27/2014
Priority:	Standard	Application Received:	07/11/2014

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 Anesthesiology, 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 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:

According to the records made available for review, this is a 41-year-old female with a 9/16/10 date of injury. At the time (6/3/14) of the request for authorization for SI joint RFA left, there is documentation of subjective (quite severe left lower extremity pain that starts off in the left side of her low back, right around the incision and goes all the way down her leg with numbness that comes into the arch of her left foot) and objective (numbness, 0/5 anterior tibialis and 0/5 extensor hallucis longus muscle strength) findings, current diagnoses (status post lumbar decompression, lumbago, and sciatica), and treatment to date (sacroiliac joint injection which did help).

IMR ISSUES, DECISIONS AND RATIONALES

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

S1 joint RFA left: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, hip & Pelvis, sacroiliac joint radiofrequency

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Hip & Pelvis Chapter, Sacroiliac joint radiofrequency neurotomy

Decision rationale: MTUS does not address this issue. ODG identifies that sacroiliac joint radiofrequency neurotomy is not recommended. Therefore, based on guidelines and a review of the evidence, the request for SI joint RFA left is not medically necessary.