MAXIMUS Federal Services

Case Number:	CM14-0019327		
Date Assigned:	04/21/2014	Date of Injury:	07/12/2007
Decision Date:	07/10/2014	UR Denial Date:	01/16/2014
Priority:	Standard	Application Received:	02/14/2014

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 Neurosurgery 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:

The patient is a 63 year old female who sustained an injury on 07/12/07 due to cumulative trauma in the upper extremities. The patient was followed for complaints of pain in the cervical spine, bilateral wrists, and right shoulder. There was also a diagnosis of chronic regional pain syndrome. Previous electrodiagnostic studies of the upper and lower extremities noted evidence of bilateral C6 radiculopathy and irritability in the L5 distribution. Prior surgical procedures included carpal tunnel release and for the right shoulder. The patient also received injections including epidural steroid injections and Synvisc injections for the right knee. The most recent surgical procedures were for the right thumb in June of 2012 and right knee in August of 2012. The patient was seen on 11/19/13 with complaints of increasing headaches mainly in the right hemicranial and cervical cranial region. The patient also described right continuing right shoulder pain that had progressed. On physical examination there was allodynia over the occipital region. Trial of occipital block trial was recommended at this visit. The patient had unrelated diagnoses including gastrointestinal reflux disease and hypertension. Vital signs noted elevated blood pressure in 10/03 at 149/80. The patient was utilizing Lisinopril, HCTZ, and ASA the most recent report from 04/03/14 again noted elevated blood pressure at 156/80 with the use of HCTZ. There were concerns for TSH levels. Previous laboratory studies from 02/14 noted TSH of .14. Repeat studies on 03/03/14 reported TSH of .04. While the requested occipital nerve blocks were approved the pre-injection EKG chest x-rays and laboratory studies including CBC, CMP, lipid and liver panels, PT/PTT, and aquatic therapy for 12 sessions as well as pre-operative medical clearance was denied by utilization review on 01/16/14.

IMR ISSUES, DECISIONS AND RATIONALES

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

PRE-OPs FOR OCCIPITAL BLOCK INJECTION: EKG: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ICSI Guidelines, Pre-Op Lab.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Low Back Chapter, Pre-Operative EKG.

Decision rationale: In regards to the pre-operative request for EKG prior to occipital nerve blocks, this reviewer would not have recommended this study as medically necessary. Although the patient has comorbid conditions including hypertension that was somewhat elevated even with medications, the procedures requested for this patient were of a substantially lower risk factor than standard surgical intervention requiring anesthesia. Given the relatively low risk factors for complications when performing occipital nerve blocks the use of EKG would be considered excessive and not medically necessary.

PRE-OPs FOR OCCIPITAL BLOCK INJECTION: CHEST X-RAY (CXR): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ICSI Guidelines, Pre-Op Lab.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Low Back Chapter, Pre-Operative General.

Decision rationale: In regards to the pre-operative request for pre-procedure chest x-rays prior to occipital nerve blocks, this reviewer would not have recommended this study as medically necessary. Although the patient has comorbid conditions including hypertension that was somewhat elevated even with medications, the procedures requested for this patient were of a substantially lower risk factor than standard surgical intervention requiring anesthesia. Given the relatively low risk factors for complications when performing occipital nerve blocks the requested pre procedure chest rays would be considered excessive and not medically necessary.

PRE-OP CLEARANCE: CBC (COMPLETE BLOOD COUNT): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ICSI Guidelines, Pre-Op Lab.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Low Back Chapter, Pre-Operative Laboratory Studies.

Decision rationale: In regards to the pre-operative request for a pre-procedure CBC prior to occipital nerve blocks, this reviewer would not have recommended this study as medically necessary. Although the patient has comorbid conditions including hypertension that was somewhat elevated even with medications, the procedures requested for this patient were of a substantially lower risk factor than standard surgical intervention requiring anesthesia. Given the relatively low risk factors for complications when performing occipital nerve blocks the requested CBC study would be considered excessive and not medically necessary.

PRE-OP CLEARANCE: COMPREHENSIVE METABOLIC PANEL: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ICSI Guidelines, Pre-Op Lab.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Low Back Chapter, Pre-Operative Laboratory Studies.

Decision rationale: In regards to the pre-operative request for a pre-procedure CMP prior to occipital nerve blocks, this reviewer would not have recommended this study as medically necessary. Although the patient has comorbid conditions including hypertension that was somewhat elevated even with medications, the procedures requested for this patient were of a substantially lower risk factor than standard surgical intervention requiring anesthesia. Given the relatively low risk factors for complications when performing occipital nerve blocks a pre-procedure CMP would be considered excessive and not medically necessary.

PRE-OP CLEARANCE: LIPID PANEL: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ICSI Guidelines, Pre-Op Lab.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Low Back Chapter, Pre-Operative Laboratory Studies.

Decision rationale: In regards to the pre-operative request for pre-procedure lipid panels prior to occipital nerve blocks, this reviewer would not have recommended this study as medically necessary. Although the patient has comorbid conditions including hypertension that was somewhat elevated even with medications, the procedures requested for this patient were of a substantially lower risk factor than standard surgical intervention requiring anesthesia. Given the relatively low risk factors for complications when performing occipital nerve blocks the requested lipid panel would be considered excessive and not medically necessary.

PRE-OP CLEARANCE: LIVER PANEL: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ICSI Guidelines, Pre-Op Lab.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Low Back Chapter, Pre-Operative Laboratory Studies.

Decision rationale: In regards to the pre-operative request for pre-procedure liver panels prior to occipital nerve blocks, this reviewer would not have recommended this study as medically necessary. Although the patient has comorbid conditions including hypertension that was somewhat elevated even with medications, the procedures requested for this patient were of a substantially lower risk factor than standard surgical intervention requiring anesthesia. Given the relatively low risk factors for complications when performing occipital nerve blocks the requested liver panel would be considered excessive and not medically necessary.

PRE-OP CLEARANCE: PT/PTT (PROTHROMBIN TIME AND PARTIAL THROMBLASTIN TIME): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ICSI Guidelines, Pre-Op Lab.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (Odg) Low Back Chapter, Pre-Operative Laboratory Studies.

Decision rationale: In regards to the pre-operative request for pre-procedure PT/PTT prior to occipital nerve blocks, this reviewer would not have recommended this study as medically necessary. Although the patient has comorbid conditions including hypertension that was somewhat elevated even with medications, the procedures requested for this patient were of a substantially lower risk factor than standard surgical intervention requiring anesthesia. Given the relatively low risk factors for complications when performing occipital nerve blocks the requested PT/PTT would be considered excessive and not medically necessary.

AQUATIC THERAPY X 12 SESSIONS: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Aquatic Therapy.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Aquatic Therapy Page(s): 13.

Decision rationale: In regards to aquatic therapy for 12 sessions, the clinical documentation submitted for review did not establish what functional benefits would be obtained with this therapy. The clinical documentation did not contain any specific goals expected from aquatic therapy. It was unclear how aquatic therapy would reasonably address the ongoing symptoms stemming from a seven year in seven year old injury. As such this reviewer would not have recommended this rehabilitation as medically necessary.

PRE-OP MEDICAL CLEARANCE: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ICSI Guidelines, Pre-Op Lab.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (Odg) Low Back Chapter, Pre-Operative General.

Decision rationale: In regards to the pre-operative request for pre-procedure medical clearance prior to occipital nerve blocks, this reviewer would not have recommended this study as medically necessary. Although the patient has comorbid conditions including hypertension that was somewhat elevated even with medications, the procedures requested for this patient were of a substantially lower risk factor than standard surgical intervention requiring anesthesia. Given the relatively low risk factors for complications when performing occipital nerve blocks the requested medical clearance would be considered excessive and not medically necessary.