

Case Number:	CM14-0154870		
Date Assigned:	09/24/2014	Date of Injury:	06/09/2004
Decision Date:	10/29/2014	UR Denial Date:	09/09/2014
Priority:	Standard	Application Received:	09/22/2014

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 Orthopedic Spine Surgeon and is licensed to practice in Texas. 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 injured worker is a 50-year-old female who reported an injury on 06/09/2004 due to cumulative trauma while performing normal job duties. The injured worker reportedly sustained an injury to her cervical and lumbar spine. The injured worker's treatment history included epidural steroid injections, sacroiliac joint injections, medial branch blocks, radiofrequency ablation, and trigger point injections. The injured worker was evaluated on 09/19/2014. It was documented that the injured worker had persistent pain complaints rated at a 6/10 with medications that were increased to an 8/10 without medications. It was documented that the injured worker's surgical history included a discectomy and laminectomy in 1995 and a lumbar fusion in 1996. The injured worker's medications included Flexeril and Celebrex. Diagnostic studies included a CT scan of the lumbar spine, and an MRI of the lumbar spine. The injured worker's diagnoses included lumbar spondylosis. The injured worker's treatment plan included lumbar radiofrequency ablation as the patient had facet syndrome and had received 50% pain relief for approximately 15 months from the previous procedure. A request was made for epidural lysis of adhesions on an outpatient basis for multiple sessions; however, no justification for the request was provided. A Request for Authorization Form dated 09/22/2014 was submitted to support the request.

IMR ISSUES, DECISIONS AND RATIONALES

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

Epidural Lysis of Adhesions, Outpatient (Multiple Sessions): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines: Treatment Index, 12th Edition (web) 2014, Low Back- Criteria for use of Facet Joint Radiofrequency Neurotomy

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, Adhesiolysis, spinal endoscopic

Decision rationale: The requested epidural lysis of adhesions on an outpatient basis for multiple sessions is not medically necessary or appropriate. California Medical Treatment Utilization Schedule does not specifically address this procedure. Official Disability Guidelines indicate that although this current studies offer promising results, there is not enough scientific evidence to support the efficacy and safety of this procedure. Official Disability Guidelines state that it is still considered investigational and would not be supported. The clinical documentation submitted for review does not provide any evidence of exceptional factors to support extending treatment beyond guideline recommendations. As such, the requested epidural lysis of adhesions, outpatient (multiple sessions) is not medically necessary or appropriate.