

Case Number:	CM14-0182707		
Date Assigned:	11/07/2014	Date of Injury:	05/26/2010
Decision Date:	12/15/2014	UR Denial Date:	10/08/2014
Priority:	Standard	Application Received:	11/03/2014

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 Physical Medicine & Rehabilitation, has a subspecialty in Interventional Spine 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 41-year-old male with a date of injury of 05/26/2010. The requesting physician provides no progress reports for review. The earliest progress report provided for review is dated 08/04/2014. According to this report, the patient presents with back and leg pain. He has recently received epidural steroid injections which has helped him overall with low back and leg pain. However, slight exertion in activity has increased the pain. The patient has discomfort daily associated with weakness, numbness, and tingling down this distribution. Examination revealed lower extremity is 5/5 with strength bilaterally and there is mild right Achilles deep tendon reflex diminished at 2/4. Straight leg raise test is positive on the right. The listed diagnoses are lumbar herniated disk measured at 4 mm at L5-S1; lumbar disk degenerative disease; lumbar radiculopathy; and lumbar central canal stenosis. Utilization review discusses a progress report by from 10/02/2014 which states that the patient has low back pain with intermittent tightness and spasm throughout the calf and numbness in the right great toe. Examination revealed restricted range of motion with weakness noted throughout the right lower extremity. Straight leg was noted as negative. There was decreased sensation in the right L5 distribution. The request is for a right L4-L5 and L5-S1 facet block. Utilization review denied the request on 10/08/2014. Treatment reports from 02/07/2013 through 08/04/2014 were provided for review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Right L4-5 and L5-S1 facet block: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 300, Chronic Pain Treatment Guidelines Epidural Steroid Injections (ESIs) Page(s): 46. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back

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, Facet Joint Pain, Signs & Symptoms

Decision rationale: This patient presents with chronic low back pain. This is a request for right L4-L5 and L5-S1 facet block. ACOEM Guidelines do not discuss facet injections for treatment, but do discuss dorsal medial branch block as well as radiofrequency ablation on page 300 and 301. The Official Disability Guidelines (ODG) also supports facet diagnostic evaluation for patients presenting with paravertebral tenderness with non-radicular symptoms. In this case, the patient presents with radicular symptoms, with positive straight leg raise and a diagnosis of lumbar radiculopathy. Facet blocks are only supported for non-radicular symptoms. Therefore, this request is not medically necessary.