

Case Number:	CM14-0034903		
Date Assigned:	06/23/2014	Date of Injury:	09/24/2012
Decision Date:	08/05/2014	UR Denial Date:	03/07/2014
Priority:	Standard	Application Received:	03/20/2014

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 22-year-old male with a 9/24/12 date of injury and status post L5/S1 fusion with instrumentation (date unknown). At the time (2/26/14) of the request for authorization for lumbar facet injections x2 L4-5 and L5-S1, there is documentation of subjective (low back pain) and objective (loss of lumbar lordosis, decreased range of motion, restricted flexion with pain, 30 degrees left rotation with pain, 25 degrees right rotation with pain, and positive midline lumbar tenderness) findings, current diagnoses (post-lami syndrome, lumbar), and treatment to date (medication, physical therapy, and a home exercise program). There is no documentation of any previous fusion procedure at the planned injection level.

IMR ISSUES, DECISIONS AND RATIONALES

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

Lumbar facet injections x2 L4-5 and L5-S1: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Low Back.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 300. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Low Back, Medial Branch Blocks (MBBs).

Decision rationale: The MTUS reference to ACOEM identifies documentation of non-radicular facet mediated pain as criteria necessary to support the medical necessity of medial branch block. Official Disability Guidelines identifies documentation of low-back pain that is non-radicular and at no more than two levels bilaterally, failure of conservative treatment (including home exercise, PT, and NSAIDs) prior to the procedure for at least 4-6 weeks, and no more than 2 joint levels to be injected in one session, as criteria necessary to support the medical necessity of medial branch block. In addition, Official Disability Guidelines identifies diagnostic facet blocks should not be performed in patients who have had a previous fusion procedure at the planned injection level and no more than one therapeutic intra-articular block is suggested. Within the medical information available for review, there is documentation of diagnoses of post-lami syndrome, lumbar. In addition, there is documentation of low-back pain that is non-radicular, failure of conservative treatment (including home exercise, PT, and NSAIDs) prior to the procedure for at least 4-6 weeks, and no more than 2 joint levels to be injected in one session. However, given documentation of L5/S1 fusion with instrumentation, there is no documentation of no previous fusion procedure at the planned injection level. Therefore, based on guidelines and a review of the evidence, the request for lumbar facet injections x2 L4-5 and L5-S1 is not medically necessary.