

Case Number:	CM14-0049519		
Date Assigned:	07/07/2014	Date of Injury:	05/20/2011
Decision Date:	09/05/2014	UR Denial Date:	03/24/2014
Priority:	Standard	Application Received:	04/17/2014

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 Occupational Medicine 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 represented [REDACTED] employee who has filed a claim for chronic low back pain reportedly associated with an industrial injury of May 20, 2011. Thus far, the patient has been treated with the following: Analgesic medications; attorney representation; unspecified amounts of physical therapy; and reported return to work as a truck driver. In a Utilization Review Report dated March 24, 2014, the claims administrator denied a request for repeat left lumbar medial branch blocks. The patient's attorney subsequently appealed, in a letter dated April 17, 2014, stating that the patient had an initial set of lumbar medial branch blocks on February 26, 2014, generating 100% pain relief for more than two hours. In a medical progress note dated March 30, 2014, the patient presented with persistent complaints of low back pain, 3-5/10, exacerbated by sitting, standing, walking, and leaning forward. The attending provider stated that earlier medial branch block of February 26, 2014, generated three hours of pain relief. Pain subsequently developed. It was acknowledged that the patient was working full time as a truck driver without restrictions. The patient was overweight, standing 5 feet 9 inches and weighing 232 pounds. The attending provider suggested that the patient pursue repeat medial branch blocks at the L3 through L5 levels.

IMR ISSUES, DECISIONS AND RATIONALES

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

REPEAT LEFT LUMBAR MEDIAL BRANCH BLOCKS L3-L4, L4-L5: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 300.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 301,.

Decision rationale: As noted in the MTUS-adopted ACOEM Guidelines in Chapter 12, page 301, facet neurotomy should be performed after appropriate investigation involving controlled differential dorsal ramus medial branch block diagnostic blocks. Thus, ACOEM does not support pursuit of repeated lumbar medial branch blocks but, rather, suggest that facet neurotomies be pursued in applicant who had a favorable response to an earlier set of diagnostic medial branch blocks. In this case, the attending provider did not furnish any compelling rationale for pursuit of repeat medial branch blocks in the face of the unfavorable ACOEM position on the same. It was not clearly stated why a repeat diagnostic procedure was being performed if the previous diagnostic medial branch blocks were already successful. Therefore, the request is not medically necessary.