

Case Number:	CM14-0069706		
Date Assigned:	07/14/2014	Date of Injury:	06/03/2009
Decision Date:	09/09/2014	UR Denial Date:	05/02/2014
Priority:	Standard	Application Received:	05/14/2014

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 Physical Medicine and Rehabilitation 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:

This is a patient with a date of injury of 6/3/09. A utilization review determination dated 5/2/14 recommends non-certification of a cervical facet block injection. It references a 3/13/14 medical report identifying neck pain radiating down the left arm to the hand. On exam, there is decreased ROM and tenderness over the facet joints. Electrodiagnostic studies and multiple injections were recommended.

IMR ISSUES, DECISIONS AND RATIONALES

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

Cervical. Facet Block Injection: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 181. Decision based on Non-MTUS Citation Official Disability Guidelines: Neck & Upper Back Chapter; Facet Blocks chapter.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004), OCCUPATIONAL MEDICINE PRACTICE GUIDELINES, Page 174-5ODG, Neck Chapter Facet joint diagnostic blocks, facet joint pain signs and symptoms, Facet joint therapeutic steroid injections.

Decision rationale: Regarding the request for cervical facet block injection, the CA MTUS and ACOEM note that "Invasive techniques (e.g., injection procedures such as injection of facet joints) have no proven benefit in treating acute neck and upper back symptoms. However, many pain physicians believe that diagnostic and/or therapeutic injections may help patients presenting in the transitional phase between acute and chronic pain." ODG recommends diagnostic medial branch blocks rather than intraarticular facet joint injections, and they are supported for cervical pain that is non-radicular and at no more than 2 levels bilaterally. Within the documentation available for review, there is evidence of radicular pain and it appears that radiculopathy is a concern given concurrent requests for electrodiagnostic testing and epidural steroid injection. Furthermore, there is no clear rationale for the use of facet injections rather than medial branch blocks. Finally, there is no documentation of the specific level(s) requested and there is no provision for modification of the current request. In light of the above issues, the currently requested cervical facet block injection is not medically necessary.