

<b>Case Number:</b>	CM14-0071747		
<b>Date Assigned:</b>	07/16/2014	<b>Date of Injury:</b>	10/31/2003
<b>Decision Date:</b>	09/15/2014	<b>UR Denial Date:</b>	04/24/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	05/19/2014

### 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:

According to the records made available for review, this is a 49-year-old female with a 10/31/03 date of injury. At the time (4/11/14) of request for authorization for Facet joint injections at bilateral L4-L5, L5-S1, # 4, there is documentation of subjective (lower back pain) and objective (decreased lumbar range of motion, tenderness to palpation over the lumbar paraspinous muscles, and tenderness over the L4-S1 facets bilaterally) findings, current diagnoses (lumbar facet arthropathy and myofascial pain), and treatment to date (medications, physical therapy, and home exercises). In addition, medical report identifies a request for lumbar bilateral L4-5 and L5-S1 facet joint injections.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Facet joint injections at bilateral L4-L6, L5-S1, # 4:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 301. Decision based on Non-MTUS Citation Official Disability Guidelines, low back, injections.

**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, Facet joint medial branch blocks (MBBs); Facet joint injections, multiple series.

**Decision rationale:** MTUS reference to ACOEM identifies documentation of non-radicular facet mediated pain as criteria necessary to support the medical necessity of medial branch block. ODG 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/facet injection. In addition, ODG identifies that no more than one therapeutic facet joint injection is suggested. Within the medical information available for review, there is documentation of diagnoses of lumbar facet arthropathy and myofascial pain. In addition, there is 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. However, given documentation of a request for Facet joint injections at bilateral L4-L5, L5-S1, # 4, there is no documentation that no more than one therapeutic facet joint injection block will be performed. Therefore, based on guidelines and a review of the evidence, the request for Facet joint injections at bilateral L4-L5, L5-S1, # 4 is not medically necessary.