

Case Number:	CM14-0073580		
Date Assigned:	07/16/2014	Date of Injury:	05/15/2012
Decision Date:	09/19/2014	UR Denial Date:	05/05/2014
Priority:	Standard	Application Received:	05/20/2014

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 Physical Medicine and Rehabilitation and is licensed to practice in Nevada. 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 injured worker is a 48-year-old gentleman who was reportedly injured on May 15, 2012. The mechanism of injury was not listed in these records reviewed. The most recent progress note dated March 26, 2014, indicated that there were ongoing complaints of neck pain and low back pain radiating to the left upper extremity. The physical examination demonstrated a loss of the normal lordotic curve of the C-spine. There was decreased range of motion of the cervical and lumbar spine with paravertebral muscle spasms. There was a positive left-sided Tinel's test and Phalen's test at the wrist. There was also a normal lower extremity neurological examination. Diagnostic imaging studies revealed a disc protrusion at L4-L5 and L5-S1 displacing the right L5 and S1 nerve roots. A cervical spine MRI revealed a disc bulge at C6-C7 and C7-T1. Previous treatment is unknown. A request was made for a bilateral L4 and L5 median branch nerve block and was not certified in the pre-authorization process on May 5, 2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Bilateral L4 medial branch block QTY: 1.00: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) low back - lumbar & thoracic (Acute & Chronic).

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 - Lumbar and Thoracic, Facet Joint Diagnostic Blocks, Updated August 22, 2014.

Decision rationale: The Official Disability Guidelines recommends facet joint diagnostic blocks for facet mediated pain only after there is documentation of failure of conservative treatment to include physical therapy, anti-inflammatory medications and home exercise. The medical record does not indicate that the injured employee has failed to improve with these conservative treatments. As such, this request for a bilateral L4 medial branch block is not medically necessary.

Bilateral L5 medial branch block QTY: 1.00: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) low back - lumbar & thoracic (Acute & Chronic).

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 - Lumbar and Thoracic, Facet Joint Diagnostic Blocks, Updated August 22, 2014.

Decision rationale: The Official Disability Guidelines recommends facet joint diagnostic blocks for facet mediated pain only after there is documentation of failure of conservative treatment to include physical therapy, anti-inflammatory medications and home exercise. The medical record does not indicate that the injured employee has failed to improve with these conservative treatments. As such, this request for a bilateral L5 medial branch block is not medically necessary.