

<b>Case Number:</b>	CM13-0026871		
<b>Date Assigned:</b>	09/03/2014	<b>Date of Injury:</b>	03/06/2001
<b>Decision Date:</b>	02/18/2015	<b>UR Denial Date:</b>	08/30/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/20/2013

### 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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: Texas, Ohio, California

Certification(s)/Specialty: Preventive Medicine, Occupational Medicine

### 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 applicant is a represented [REDACTED] employee who has filed a claim for chronic low back pain reportedly associated with an industrial injury of March 6, 2001. In a Utilization Review Report dated August 30, 2013, the claims administrator denied a request for an L4-L5 selective nerve root block. The claims administrator referenced an August 24, 2014 progress note in its determination. The applicant's attorney subsequently appealed. In said August 24, 2014 progress note, the applicant reported ongoing complaints of low back pain. Lumbar MRI imaging had demonstrated disk bulging at the L3-L4 and L4-L5 levels. Limited lumbar range of motion was noted. The attending provider posited that the applicant's low back and leg complaints were the function of an L4-L5 disk bulge generating right-sided neuroforaminal narrowing. The note was somewhat difficult to follow. The attending provider placed the applicant off of work, on total temporary disability. The actual lumbar MRI report of July 10, 2013 was reviewed and was notable for comments that the applicant had undergone a right hemilaminectomy surgery at the L4-L5 level with a new disk bulge demonstrating neuroforaminal narrowing on the right side.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Selective root block at the right L4-5: Upheld**

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Epidural Steroid Injections Page(s): 46.

**Decision rationale:** The proposed L4-L5 selective nerve root block (AKA epidural steroid injection) is not medically necessary, medically appropriate, or indicated here. While page 46 of the MTUS Chronic Pain Medical Treatment Guidelines does acknowledge that epidural steroid injections are recommended as an option in the treatment of radicular pain as was/is present here, this recommendation is, however, qualified by additional commentary made on page 46 of the MTUS Chronic Pain Medical Treatment Guidelines to the effect that pursuit of repeat blocks should be predicated on evidence of lasting analgesia and functional improvement with earlier blocks. Here, the date of injury, March 6, 2001, strongly suggested that the applicant had had prior epidural steroid injection therapy at an earlier unspecified point in time. The fact that the applicant remained off of work, on total temporary disability, strongly suggested a lack of functional improvement as defined in MTUS 9792.20f, despite earlier treatments which transpired over the course of the claim, including presumed earlier epidural steroid injection therapy. Therefore, the request is not medically necessary.