

Case Number:	CM14-0197694		
Date Assigned:	12/05/2014	Date of Injury:	10/06/2006
Decision Date:	01/23/2015	UR Denial Date:	11/17/2014
Priority:	Standard	Application Received:	11/25/2014

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 Rehab, has a subspecialty in Pain 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:

This is a patient with a date of injury of 10/6/06. A utilization review determination dated 11/17/14 recommends non-certification of cervical and lumbar facet injections. Patient underwent right C7 and 8 medial branch blocks (C7-T1 facet blocks) on 2/22/13 and 9/7/12. Patient is noted to be s/p cervical fusion C6-7. The 10/21/14 medical report identifies low back and neck pain that is very severe and there is leg swelling that has been there for 8 years. On exam, there is limited ROM.

IMR ISSUES, DECISIONS AND RATIONALES

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

Bilateral cervical facet injection C6-7: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 174-175.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 174. Decision based on Non-MTUS Citation ODG, 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 injection, CA MTUS and ODG recommend medial branch blocks rather than facet joint injections and state that one set of

diagnostic medial branch blocks is required with a response of greater than or equal to 70%. They recommend medial branch blocks be limited to patients with cervical pain that is non-radicular and at no more than 2 levels bilaterally. They also recommend that there is documentation of failure of conservative treatment including home exercise, physical therapy, and NSAIDs prior to the procedure. Guidelines reiterate that no more than 2 joint levels are injected in one session. Within the documentation available for review, there is no current documentation of any specific subjective or objective findings suggestive of facet arthropathy. Furthermore, there is no rationale provided for the use of facet joint injections rather than medial branch blocks, as recommended by the guidelines. In the absence of clarity regarding these issues, the currently requested cervical facet injection is not medically necessary.

Bilateral lumbar facet injection L5-S1: 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): 300,309. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back Chapter, Facet Joint Pain, Signs & Symptoms, Facet Joint Diagnostic Blocks (Injections), Facet Joint Medial Branch Blocks (Therapeutic)

Decision rationale: Regarding the request for lumbar facet injection, CA MTUS and ODG recommend medial branch blocks rather than facet joint injections and state that one set of diagnostic medial branch blocks is required with a response of greater than or equal to 70%. They recommend medial branch blocks be limited to patients with cervical pain that is non-radicular and at no more than 2 levels bilaterally. They also recommend that there is documentation of failure of conservative treatment including home exercise, physical therapy, and NSAIDs prior to the procedure. Guidelines reiterate that no more than 2 joint levels are injected in one session. Within the documentation available for review, there is no current documentation of any specific subjective or objective findings suggestive of facet arthropathy. Furthermore, there is no rationale provided for the use of facet joint injections rather than medial branch blocks, as recommended by the guidelines. In the absence of clarity regarding these issues, the currently requested lumbar facet injection is not medically necessary.