

Case Number:	CM14-0205682		
Date Assigned:	12/17/2014	Date of Injury:	03/04/1980
Decision Date:	02/12/2015	UR Denial Date:	11/12/2014
Priority:	Standard	Application Received:	12/09/2014

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:

The injured worker is a 63 year old individual. The injured worker's original industrial date of injury was 3/4/1980. Conservative treatment has included activity modification, and pain medications including hydromorphone, Mobic, gabapentin, and Kadian. The disputed issue is a request for right lumbar selective nerve root block. A utilization review determination had noncertified this request on November 12, 2014. The reviewer had noted documentation of selective nerve root blocks being performed by another pain position in February 2010, September 2010, and December 2010. The selective nerve blocks did not result in any change in medication usage, improvement of function, or change in pain severity, and therefore further selective nerve root blocks were not recommended.

IMR ISSUES, DECISIONS AND RATIONALES

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

Right lumbar selective nerve root block L4-L5: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Epidural Steroid Injection (ESIs).

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

Decision rationale: Regarding the request for repeat Lumbar epidural steroid injection, Chronic Pain Medical Treatment Guidelines state that epidural injections are recommended as an option for treatment of radicular pain, defined as pain in dermatomal distribution with corroborative findings of radiculopathy, and failure of conservative treatment. Guidelines recommend that no more than one interlaminar or two transforaminal be injected in one session. Regarding repeat epidural injections, guidelines state that repeat blocks should be based on continued objective documented pain and functional improvement, including at least 50% pain relief with associated reduction of medication use for six to eight weeks, with a general recommendation of no more than 4 blocks per region per year. Within the documentation available for review, there is indication that previous epidural injections have provided at least 50% pain relief with functional improvement and reduction in medication use for at least six weeks. In fact, the claims administrator and utilization reviewer had noted that there were previous selective nerve root blocks performed by another pain position in February 2010, September 2010, and December 2010. The selective nerve blocks did not result in any change in medication usage, improvement of function, or change in pain severity. The requesting provider, on the other hand, specifies in a progress note from 12/8/14 that the SNRB did help for 2-3 months but the percentage of pain relief was not documented. In the absence of such documentation, the currently requested repeat Lumbar epidural steroid injection is not medically necessary.