MAXIMUS Federal Services

Case Number:	CM15-0145874		
Date Assigned:	08/06/2015	Date of Injury:	04/17/1998
Decision Date:	09/10/2015	UR Denial Date:	07/21/2015
Priority:	Standard	Application Received:	07/27/2015

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, New York, 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 73-year-old who has filed a claim for chronic neck, back, and ankle pain reportedly associated with an industrial injury of April 17, 1998. In a Utilization Review report dated July 21, 2015, the claims administrator partially approved a request for a cervical facet injection under IV sedation as a cervical facet injection alone. The claims administrator referenced a July 11, 2015 progress note in its determination. The applicant's attorney subsequently appealed. On July 11, 2015, the attending provider reiterated his request for an intra-articular fact injection. The attending provider noted that the applicant had undergone a cervical fusion at the C4 through T1 level. The attending provider reiterated his request for intra-articular facet injections, noting ongoing issues with paraspinal tenderness, disk degeneration, and facetogenic tenderness. The applicant was using Norco for pain relief, it was reported. The applicant's work status was not furnished. The applicant's medications included Ativan, Ambien, Zestril, Dilantin, terazosin, Celebrex, Zocor, and Norco, it was reported. While anxiety was listed on the applicant's problem list, the attending provider did not explicitly state why he was seeking IV sedation. In a note dated May 22, 2015, permanent work restrictions were renewed. Cervical facet injections were apparently sought. The attending provider then reported at the bottom of the note that the applicant received intra-articular facet injections in the lumbar region on December 29, 2014 and did "well without sedation."

IMR ISSUES, DECISIONS AND RATIONALES

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

IV (intravenous) sedation, for facet injection: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines: Neck & Upper Back - Facet joint diagnostic blocks.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Occupational Disorders of the Neck and Upper Back, Facet joint diagnostic blocks.

Decision rationale: No, the request for IV sedation for a facet injection was not medically necessary, medically appropriate, or indicated here. The MTUS does not address the topic of IV sedation during facet injections. However, ODG's Neck and Upper Back Chapter Facet Joint Diagnostic Blocks topic notes that the use of IV sedation should be limited to cases of extreme anxiety. Here, however, the attending provider did not set forth a clear or compelling case for the IV sedation component of the request on his May 22, 2015 progress note. On that date, the attending provider stated that the applicant had received a lumbar intra-articular facet injection on December 29, 2014 and reportedly "did well without sedation." It did not appear, thus, that the applicant's anxiety issues were so severe or so profound that they would prevent the facet blocks in question without usage of sedation. Therefore, the request was not medically necessary.