

Case Number:	CM15-0148557		
Date Assigned:	08/11/2015	Date of Injury:	08/20/2014
Decision Date:	09/09/2015	UR Denial Date:	07/20/2015
Priority:	Standard	Application Received:	07/30/2015

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: California, Indiana, New York
Certification(s)/Specialty: Internal 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:

This 36 year old female sustained an industrial injury on 8-20-14. She subsequently reported back pain. Diagnoses include right lumbosacral strain, right lumbosacral radiculopathy and facet arthropathy at L3-4, L4-5 and L5-S1. Treatments to date include prescription pain medications. The injured worker continues to experience low back pain. Upon examination, there was tenderness to palpation across the right low back, buttock and right posterior thigh. There is pain with lumbar ranges of motion. Straight leg raising is positive on the right side. A request for Bilateral lumbar facet injection at L3-4, L4-5, and L5-S1 was made by the treating physician.

IMR ISSUES, DECISIONS AND RATIONALES

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

Bilateral lumbar facet injection at L3-4, L4-5, and L5-S1: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back Chapter.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 308. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Low back section, Facet joint injections.

Decision rationale: Pursuant to the ACOEM and the Official Disability Guidelines, bilateral lumbar facet injections at L3 - L4, L4 - L5 and L5 - S1 are not medically necessary. The ACOEM does not recommend facet injections of steroids or diagnostic blocks. (Table 8 - 8) Invasive techniques (local injections and facet joint injections of cortisone lidocaine) are of questionable merit. The criteria for use of diagnostic blocks for facet mediated pain include, but are not limited to, patients with cervical pain that is non-radicular and that no more than two levels bilaterally; documentation of failure of conservative treatment (home exercises, PT, nonsteroidal anti-inflammatory drugs) prior to procedure at least 4 to 6 weeks; no more than two facet joint levels are injected in one session; etc. In this case, the injured worker's working diagnoses are right lumbosacral strain; right lumbosacral radiculopathy; facet arthropathy at L3 - L4, L4 - L5 and L5 - S1. Date of injury is August 20, 2014. Request for authorization is July 13, 2015. According to a July 8, 2015 pain management progress note, the injured worker has ongoing low back pain. Objectively, gait is normal. There is spasm and tenderness to palpation over the lumbar spine with positive straight leg raising. MRI does not show significant stenosis and there is bilateral facet arthropathy at L3 - L4, L4 - L5 and L5 - S1. The guidelines do not recommend more than two facet joint levels be injected in one session. Additionally, there is still evidence of radiculopathy on physical examination with positive straight leg raising. The diagnoses state lumbar radiculopathy is present. Based on the clinical information in medical record, the peer-reviewed evidence-based guidelines, subtle evidence of radiculopathy on examination and a request for three levels to be injected in one session, bilateral lumbar facet injections at L3 - L4, L4 - L5 and L5 - S1 are not medically necessary.