

Case Number:	CM15-0166950		
Date Assigned:	09/04/2015	Date of Injury:	06/19/1992
Decision Date:	10/06/2015	UR Denial Date:	08/20/2015
Priority:	Standard	Application Received:	08/25/2015

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

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:

This is a 66-year-old male who sustained an industrial injury on 06-19-1992. Diagnoses include cervical fusion from occiput to C7 (1-16-2004) with residuals; cervicogenic headaches with a migraine component; and cervical dystonia. Treatment to date has included medication, trigger point injections to the mid back, cervical fusion and intrathecal pain medication pump implantation. According to the progress notes dated 8-10-2015, the IW (injured worker) reported ongoing pain in his neck with cervicogenic headaches along with pain radiating down to both upper extremities. He reported the pain could go as high as 9 out of 10, but with his current medications, it was decreased to 6 out of 10. The implanted morphine pump was beginning to work and his oral opiate medications were being slowly weaned; to that point, he was taking 40% to 50% less than before. The headaches were increasing in frequency and intensity and the headaches became migrainous. Lying down in a dark room was necessary due to photophobia and nausea. The IW requested an injection of Botox, as it provided 70% pain relief for nearly 6 months after the previous injection on 11-6-2014. The IW was also receiving jaw and dental implant work and treatments for dysphagia. On examination, there was significant tenderness in the posterior cervical musculature with increased muscle rigidity. Cervical dystonia was prominent as his head listed to the right. A request was made for Botox 400 units to be injected into the cervical and suboccipital regions for treatment of chronic migraine headaches.

IMR ISSUES, DECISIONS AND RATIONALES

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

Botox 400 units: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Botulinum toxin (Botox, Myobloc).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Botox Page(s): 25, 26. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Head/Botox.

Decision rationale: MTUS chronic pain Guidelines do not recommend Botox of chronic migraine headaches and do allow at least a trial for chronic low back pain; however, these specific recommendations are now considered dated as this they are a several years old and based on ODG Guidelines. Both of these indications have been reversed in updated versions of the Guidelines (ODG-Head 2015) i.e. botox is recommended for specific frequency/intensity of migraines and not recommended for chronic low back pain. This individual meets the updated Guideline criteria for repeat Botox injections due to the reported frequency (greater than 15 per month) of the migraine headaches and due to the reported benefit (70% improvement for several months) from the prior injections. The request is medically necessary.