

Case Number:	CM15-0214996		
Date Assigned:	11/04/2015	Date of Injury:	01/12/2014
Decision Date:	12/16/2015	UR Denial Date:	10/22/2015
Priority:	Standard	Application Received:	11/02/2015

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: Emergency 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 injured worker is a 38 year old female, who sustained an industrial injury on 01-12-2014. A review of the medical records indicates that the injured worker (IW) is undergoing treatment for lumbar strain or sprain, and lumbar disc herniation. Medical records (04-21-2015 to 10-14-2015) indicate ongoing low back pain and leg pain with weakness. Pain levels were rated 7-8 out of 10 in severity on a visual analog scale (VAS) without medications and 4 out of 10 with medications. Records also indicate that the IW has a past history of depression, anxiety, asthma, high blood pressure, and autoimmune disorders. Per the treating physician's progress report (PR), the IW has not returned to work. The PR, dated 10-14-2015, reported that the lumbar facet injections were previously authorized; however, the conscious sedation was denied. It was also noted that the IW has a lot of anxiety about getting injections. Relevant treatments have included: physical therapy (PT), chiropractic treatments, H-wave, work restrictions, and pain medications. The treating physician indicates that a MRI of the lumbar spine (12-2014) showed a broad-based disc bulge at L4-5 with facet and ligamentum flavum hypertrophy resulting in mild canal narrowing and mild bilateral inferior neural foraminal narrowing. The request for authorization (10-19-2015) shows that the following service was requested: conscious sedation for lumbar facet injections at right L4-5 and L5-S1. The original utilization review (10-22-2015) non-certified the request for conscious sedation for lumbar facet injections at right L4-5 and L5- S1.

IMR ISSUES, DECISIONS AND RATIONALES

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

Conscious sedation for lumbar facet injections at right L4-5 and L5-S1: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back updated 9/22/2015.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Low Back - Lumbar & Thoracic (Acute & Chronic), Facet joint diagnostic blocks (injections).

Decision rationale: The requested Conscious sedation for lumbar facet injections at right L4-5 and L5-S1, is not medically necessary. CA MTUS is silent and Official Disability Guidelines, Low Back - Lumbar & Thoracic (Acute & Chronic), Facet joint diagnostic blocks (injections), recommend these diagnostic blocks with the following criteria: "Limited to patients with low-back pain that is non-radicular and at no more than two levels bilaterally. There is documentation of failure of conservative treatment. Diagnostic blocks may be performed with the anticipation that if successful, treatment may proceed to facet neurotomy at the diagnosed levels." The treating physician has documented that the lumbar facet injections were previously authorized; however, the conscious sedation was denied. It was also noted that the IW has a lot of anxiety about getting injections. Relevant treatments have included: physical therapy (PT), chiropractic treatments, H-wave, work restrictions, and pain medications. The treating physician indicates that a MRI of the lumbar spine (12-2014) showed a broad-based disc bulge at L4-5 with facet and ligamentum flavum hypertrophy resulting in mild canal narrowing and mild bilateral inferior neural foraminal narrowing. The request for authorization (10-19-2015) shows that the following service was requested: conscious sedation for lumbar facet injections at right L4-5 and L5-S1. The treating physician has documented the ability assess the symptomatic and functional benefit from a diagnostic facet block if the injured worker is to receive conscious sedation. The criteria noted above not having been met, Conscious sedation for lumbar facet injections at right L4-5 and L5-S1 is not medically necessary.