

Case Number:	CM15-0044379		
Date Assigned:	03/16/2015	Date of Injury:	02/02/1990
Decision Date:	04/16/2015	UR Denial Date:	03/03/2015
Priority:	Standard	Application Received:	03/09/2015

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: Maryland

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Neuromuscular 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 51 year old male, who sustained an industrial injury on 2/2/90. He reported pain in the lower back related to a motor vehicle accident. The injured worker was diagnosed as having lumbago, lumbar degenerative disc disease and myelopathy. Treatment to date has included lumbar MRI, lumbar fusion, chiropractic treatments and pain medications. As of the PR2 dated 2/10/15, the injured worker reports some improvement following the right L5-S1 injection he received on 1/29/15 and that he is able to decrease his Norco from 6 to 4 pills daily. The treating physician noted decreased range of motion and pain with lumbar flexion, extension and rotation. The injured worker had a right L2-L4 facet joint nerve block on 5/8/14 and reported that his pain nearly resolved. The treating physician is requesting a left L2-L4 facet joint nerve block. A 3/10/15 document states that reflexes are 2+ in the bilateral patella and minimal in the Achilles. There is no clonus. Sensation is normal. There is reduced muscle strength in the right greater than left plantar flexion, dorsiflexion, and diffusely in the lower lumbs. The patient complains of low back pain radiating to the right medial buttock and proximal thigh. The assessment on this date is recurrent right S1 radiculopathy, low back pain and lumbar facet pain. The plan is to have a lumbar facet joint nerve block on 3/12/15.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 left Lumbar L2-4 Facet joint nerve block: Upheld

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 300-301. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Lumbar & Thoracic (Acute & Chronic) Facet joint diagnostic blocks (injections).

Decision rationale: 1 left Lumbar L2-4 Facet joint nerve block is not medically necessary per the MTUS Chronic Pain and the ODG guidelines. The MTUS ACOEM guidelines state that facet neurotomies should be performed only after appropriate investigation involving controlled differential dorsal ramus medial branch diagnostic blocks. The ODG states that medial branch blocks should be limited to patients with low-back pain that is non-radicular and at no more than two levels bilaterally. The documentation states that the patient has a recurrent radiculopathy. The history of a recent epidural correlates with this diagnoses. The ODG does not recommend facet injections in the presence of radiculopathy, therefore the request for 1 left lumbar L2-L4 facet joint nerve block is not medically necessary.