

Case Number:	CM15-0081602		
Date Assigned:	05/04/2015	Date of Injury:	06/07/2004
Decision Date:	06/02/2015	UR Denial Date:	04/02/2015
Priority:	Standard	Application Received:	04/28/2015

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 (IW) is a 48-year-old female who sustained an industrial injury on 06/07/2004. Diagnoses include neck pain, cervical facet pain and chronic pain syndrome. Treatment to date has included medications, home exercise program, physical therapy, epidural steroid injections, cervical facet injections and H-wave unit. Per documentation the patient has had a prior C5-6 interbody fusion. Diagnostics included MRIs. According to the progress notes dated 3/23/15, the IW reported her neck pain was getting worse and she was getting headaches almost daily. Cervical facet injections were helpful in the past. She reported Norco was effective for approximately four to six hours. Her pain was rated 8/10 without medications and 4/10 with medications. A request was made for cervical facet steroid injections at C2-3, C5-6 and C6-7 right and Norco 10/325mg, #90.

IMR ISSUES, DECISIONS AND RATIONALES

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

Cervical facet steroid injection at C2-3, C5-6, C6-7 right: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 174-175. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Neck and Upper Back Chapter, Facet joint diagnostic blocks.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 174-175. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Neck and upper back- Facet joint therapeutic steroid injections and Facet joint diagnostic blocks.

Decision rationale: Cervical facet steroid injection at C2-3, C5-6, C6-7 right is not medically necessary per the MTUS and the ODG Guidelines. The ACOEM MTUS Guidelines state that there is limited evidence that radio-frequency neurotomy may be effective in relieving or reducing cervical facet joint pain among patients who had a positive response to facet injections. The ODG states that when performing therapeutic or diagnostic facet blocks no more than 2 levels may be blocked at any one time. The request for cervical facet injections is not medically necessary.

Norco 10/325mg #90: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 78.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Ongoing management Page(s): 78-80.

Decision rationale: Norco 10/325mg #90 is not medically necessary per the MTUS Chronic Pain Medical Treatment Guidelines. The MTUS states that a satisfactory response to treatment may be indicated by the patient's decreased pain, increased level of function, or improved quality of life. The MTUS does not support ongoing opioid use without improvement in function or pain. The documentation reveals that the patient has been on long term opioids. The request is not medically necessary.