

Case Number:	CM15-0240441		
Date Assigned:	12/17/2015	Date of Injury:	02/01/2014
Decision Date:	01/21/2016	UR Denial Date:	12/08/2015
Priority:	Standard	Application Received:	12/09/2015

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: California, South Carolina

Certification(s)/Specialty: Preventive Medicine, Occupational Medicine, Family Practice

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 65 year old man sustained an industrial injury on 2-1-2014. Diagnoses include chronic pain due to trauma, chronic pain syndrome, low back pain, lumbar and lumbosacral spondylosis without myelopathy or radiculopathy, meralgia paresthetica of the left lower limb, left hip pain, right knee pain, and sleep apnea. Treatment has included oral medications, chiropractic care, massage, and physical therapy. Physician notes dated 11-30-2015 show complaints of low back pain, left hip pain with radiation around the left groin, left thigh numbness to the knee, intermittent right knee pain, and abdominal bulging. The worker states his pain ranges from 4-7 out of 10. The physical examination shows moderate discomfort, tenderness to the lower lumbar facets, positive bilateral facet loading tests, and painful lumbar range of motion. Tenderness was also noted to the right knee joint and left hip joint with radiation to the left groin and showed painful range of motion with an antalgic gait. Patrick's test was positive. Recommendations include medial branch blocks to the left L3, L4, and L5 under fluoroscopy guidance, left hip joint intra-articular steroid injection under fluoroscopy, ibuprofen, and follow up in six weeks. Utilization Review denied a request for left hip intra-articular steroid injection under fluoroscopy on 12-8-2015.

IMR ISSUES, DECISIONS AND RATIONALES

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

Left Hip joint intra articular steroid injection under fluoroscopy: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Criteria for use of diagnostic blocks.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Hip & Pelvis (Acute & Chronic), Intra-articular steroid hip injection (IASHI).

Decision rationale: The CA MTUS is silent concerning intra-articular hip steroid injection (IASHI), but the cited ODG does not recommend it early hip osteoarthritis (OA). However, intra-articular injection is under study for moderately advanced or severe hip OA, but if conducted, should be in conjunction with fluoroscopic guidance. According to the treating provider notes through 11-30-2015, the injured worker had complained of left hip pain radiating to the groin. Evaluation of the past documentation however, did not yield a diagnosis of left hip OA, nor is there corroborating imaging studies. Therefore, although the injured worker may benefit from (IASHI), the supporting documentation is not present. Thus the request for left hip joint intra-articular steroid injection under fluoroscopy is not medically necessary and appropriate.