

Case Number:	CM14-0147843		
Date Assigned:	09/15/2014	Date of Injury:	04/07/2014
Decision Date:	10/15/2014	UR Denial Date:	08/11/2014
Priority:	Standard	Application Received:	09/11/2014

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. The expert reviewer is Board Certified in Physical Medicine & Rehabilitation, and is licensed to practice in California. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

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 40-year-old male who reported an injury on 04/07/2014 due to an unknown mechanism. Diagnoses were probable re-tear of his anterior cruciate ligament, left knee, cervical spine radiculopathy, and right thumb trigger thumb. Physical examination 09/23/2014 revealed complaints of weakness in the left knee. The injured worker reported that the knee felt like it was shifting. The injured worker had an MRI scan of the cervical spine that revealed a C5-6 disc protrusion, for which he had recently undergone a cervical epidural injection about 3 weeks ago and currently remained symptomatic with less numbness that radiated down his left arm. The injured worker also received a cortisone injection to his right thumb. He was no longer experiencing any triggering. Examination revealed cervical flexion was to 40 degrees, extension 25 degrees, tilt right and left were 20 degrees. Treatment plan was for a repeat of the cervical epidural steroid injection. The rationale and Request for Authorization were not submitted for review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Cervical Epidural Steroid Injection: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 46. Decision based on Non-MTUS Citation Manchikanti, 2003, CMS 2004, Bowell 2007

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Epidural Steroid Injection, Page(s): 46.

Decision rationale: The decision for cervical Epidural Steroid Injection is not medically necessary. The California Medical Treatment Utilization Schedule Guidelines recommend for an Epidural Steroid Injection that radiculopathy must be documented by physical examination and corroborated by imaging studies and/or electrodiagnostic testing, and the pain must be initially unresponsive to conservative treatment including exercise, physical therapy, NSAIDs, and muscle relaxants. No more than 2 nerve root levels should be injected using transforaminal blocks. No more than 1 interlaminar level should be injected at 1 session. For repeat blocks, there must be objective documented pain relief and functional improvement, including at least 50% pain relief with associated reduction of medication use for 6 to 8 weeks, with a general recommendation of no more than 4 blocks per region, per year. It was not reported that the injured worker was unresponsive to conservative care, such as physical therapy, acupuncture, or chiropractic sessions. The medical guidelines state for repeat epidural steroid injections, there should be objective and functional improvement, and documentation of at least 6 to 8 weeks of pain relief. The request does not indicate a location for the Cervical Epidural Steroid Injection. Therefore, this request is not medically necessary.