MAXIMUS Federal Services

Case Number:	CM14-0149352		
Date Assigned:	09/18/2014	Date of Injury:	05/05/2011
Decision Date:	10/17/2014	UR Denial Date:	09/09/2014
Priority:	Standard	Application Received:	09/15/2014

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 and Rehabilitation and is licensed to practice in Texas. 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:

Medical Records reflect the claimant is a 50 year old male who susteind a work injury on 5-5-11 as a result of lifting a patient. He had a re-inury on 4-5-13 lfitng antoehr patient. The cm has been accented for right shoulder and cervical spine. The claimant is status psot right shoulder arthroscopic assisted excision of distal clavicle on 8-10-11, right shoulder arthroscopic CA liegmaent resection, rotator cuff debridment, debridment of labrarl tear on 2-24-12, diagnostic arthroscopy, extensive debrimdent of the labrum and articular surface of the humeral head with chondiropalsty, subacromial decormepssion and distal clavlce exsion on 6-17-13. On 8-8-14, the claimant underwent cervical facet injeciotnon right from C2-C3 to C4-C5. Office visit on 8-26-14 ntoes the claimant has neck pain with radiating pain to the right shoulder. He reported that facet injection gave him greater than 50% eleif of pain. The claimant continues on Norco. On exam, the claimant has tendnerss to laption at right side facets from C2 to C5. Spurlings maneuver to the elft eleictis radiating pain from the right side of the neck to above the eye.

IMR ISSUES, DECISIONS AND RATIONALES

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

Right Cervical Facet Rhizotomy C2-3 QTY: 1.00: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG Neck & Upper Back (updated 08/04/14) Criteria for use of cervical facet radiofrequency neurotomy:

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation (ODG) Cervical spine - facet blocks

Decision rationale: ODG reflects that one set of diagnostic medical branch blocks is required with a response of 70%. The pain response should be approximately 2 hours for Lidocaine. When performing therapeutic blocks, no more than 2 levels may be blocked at any one time. This claimant had a facet blocks at three levels with reported 50% pain relief. This claimant does not meet the criteria for therapeutic facet blocks. He did not have the diagnostic blocks required (medial branch block), duration or response of pain relief as required. Therefore, the medical necessity of this request is not established.

Right Cervical Facet Rhizotomy C3-4 QTY: 1.00: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG Neck & Upper Back (updated 08/04/14) Criteria for use of cervical facet radiofrequency neurotomy

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation (ODG) Cervical spine - facet blocks

Decision rationale: ODG reflects that one set of diagnostic medical branch blocks is required with a response of 70%. The pain response should be approximately 2 hours for Lidocaine. When performing therapeutic blocks, no more than 2 levels may be blocked at any one time. This claimant had a facet blocks at three levels with reported 50% pain relief. This claimant does not meet the criteria for therapeutic facet blocks. He did not have the diagnostic blocks required (medial branch block), duration or response of pain relief as required. Therefore, the medical necessity of this request is not established.

Right Cervical Facet Rhizotomy C4-5 QTY: 1.00: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG Neck & Upper Back (updated 08/04/14) Criteria for use of cervical facet radiofrequency neurotomy

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation (ODG) Cervical spine - facet blocks

Decision rationale: ODG reflects that one set of diagnostic medical branch blocks is required with a response of 70%. The pain response should be approximately 2 hours for Lidocaine. When performing therapeutic blocks, no more than 2 levels may be blocked at any one time. This claimant had a facet blocks at three levels with reported 50% pain relief. This claimant does not meet the criteria for therapeutic facet blocks. He did not have the diagnostic blocks required (medial branch block), duration or response of pain relief as required. Therefore, the medical necessity of this request is not established.

Epidurography QTY: 1.00: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG Neck & Upper Back (updated 08/04/14) Criteria for use of cervical facet radiofrequency neurotomy:

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation (ODG) Cervical spine - facet blocks

Decision rationale: ODG reflects that one set of diagnostic medical branch blocks is required with a response of 70%. The pain response should be approximately 2 hours for Lidocaine. When performing therapeutic blocks, no more than 2 levels may be blocked at any one time. This claimant had a facet blocks at three levels with reported 50% pain relief. This claimant does not meet the criteria for therapeutic facet blocks. He did not have the diagnostic blocks required (medial branch block), duration or response of pain relief as required. Therefore, the medical necessity of this request is not established, as the requested procedure is not medically necessary.

Fluoroscopy QTY: 1.00: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation (ODG) Cervical spine - facet blocks

Decision rationale: ODG reflects that one set of diagnostic medical branch blocks is required with a response of 70%. The pain response should be approximately 2 hours for Lidocaine. When performing therapeutic blocks, no more than 2 levels may be blocked at any one time. This claimant had a facet blocks at three levels with reported 50% pain relief. This claimant does not meet the criteria for therapeutic facet blocks. He did not have the diagnostic blocks required (medial branch block), duration or response of pain relief as required. Therefore, the medical necessity of this request is not established, as the requested procedure is not medically necessary.

Anesthesia for procedures on cervical spine and cord QTY: 1.00: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation (ODG) Cervical spine - facet blocks

Decision rationale: ODG reflects that one set of diagnostic medical branch blocks is required with a response of 70%. The pain response should be approximately 2 hours for Lidocaine. When performing therapeutic blocks, no more than 2 levels may be blocked at any one time. This claimant had a facet blocks at three levels with reported 50% pain relief. This claimant

does not meet the criteria for therapeutic facet blocks. He did not have the diagnostic blocks required (medial branch block), duration or response of pain relief as required. Therefore, the medical necessity of this request is not established, as the requested procedure is not medically necessary.