

Case Number:	CM14-0156278		
Date Assigned:	09/25/2014	Date of Injury:	03/07/2014
Decision Date:	10/27/2014	UR Denial Date:	09/13/2014
Priority:	Standard	Application Received:	09/24/2014

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 Anesthesiology, has a subspecialty in Pain Management 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:

According to the records made available for review, this is a 65-year-old male with a 3/7/14 date of injury. At the time (8/25/14) of request for authorization for Lumbar Facet medial branch block injection, there is documentation of subjective (left hand and low back pain) and objective (decreased sensation to light touch in the right second digit, positive straight leg raise, positive facet loading test, and tenderness to palpitation over the cervical paraspinal, upper trapezius, scapular border, lumbar paraspinal musculature, and sacroiliac joint region) findings, current diagnoses (cervical radiculopathy, lumbago, lumbar radiculopathy, lumbar stenosis, and lumbar facet dysfunction), and treatment to date (Epidural injections, acupuncture, and medications (including ongoing treatment with Celebrex)). There is no documentation of pain that is non-radicular and at no more than two levels bilaterally, failure of additional conservative treatment (home exercise and physical therapy) prior to the procedure for at least 4-6 weeks, and no more than 2 joint levels to be injected in one session.

IMR ISSUES, DECISIONS AND RATIONALES

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

Lumbar Facet medial branch block injection: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 300. Decision based on Non-MTUS Citation Official Disability Guidelines ODG

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 300. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Low Back, Medial Branch Blocks (MBBs)

Decision rationale: The American College of Occupational and Environmental Medicine (ACOEM) identifies documentation of non-radicular facet mediated pain as criteria necessary to support the medical necessity of medial branch block. Official Disability Guidelines (ODG) identifies documentation of low-back pain that is non-radicular and at no more than two levels bilaterally, failure of conservative treatment (including home exercise, physical therapy (PT), and NSAIDs) prior to the procedure for at least 4-6 weeks, and no more than 2 joint levels to be injected in one session, as criteria necessary to support the medical necessity of medial branch block. Within the medical information available for review, there is documentation of diagnoses of cervical radiculopathy, lumbago, lumbar radiculopathy, lumbar stenosis, and lumbar facet dysfunction. In addition, there is documentation of low-back pain and failure of conservative treatment (medications). However, given documentation of a diagnosis of lumbar radiculopathy and objective (positive straight leg raise) findings, there is no (clear) documentation of pain that is non-radicular. In addition, given no documentation of the level(s) to be addressed, there is no (clear) documentation of pain at no more than two levels bilaterally and no more than 2 joint levels to be injected in one session. Furthermore, there is no documentation of failure of additional conservative treatment (home exercise and physical therapy) prior to the procedure for at least 4-6 weeks.. Therefore, based on guidelines and a review of the evidence, the request for Lumbar Facet medial branch block injection is not medically necessary.