

Case Number:	CM14-0162257		
Date Assigned:	10/07/2014	Date of Injury:	01/29/2014
Decision Date:	11/13/2014	UR Denial Date:	09/03/2014
Priority:	Standard	Application Received:	10/02/2014

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 Occupational Medicine, 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 applicant is a represented [REDACTED] employee who has filed a claim for neck pain reportedly associated with an industrial injury of January 29, 2014. In a Utilization Review Report dated September 3, 2014, the claims administrator denied a request for cervical facet injections. The claims administrator stated that the applicant had complaints of neck pain radiating into shoulder. The claims administrator suggested that it was basing its decision on an August 26, 2014 Request for Authorization (RFA) form, however, did not appear to have been incorporated into the IMR packet. The applicant's attorney subsequently appealed. Cervical MRI imaging of April 29, 2014 was notable for severe bilateral neuroforaminal narrowing at the C5-C6 level and moderate-to-severe neuroforaminal narrowing at the C6-C7 level. The bulk of the information on file appeared to comprise of MRI images, with comparatively little to no clinical information. In an October 2, 2014 progress note/work status report, the applicant was given a 5- to 15-pound lifting limitation. It was suggested (but not clearly stated) that the applicant was not working. Multilevel cervical facet injections were sought via an RFA form without any associated clinical information or narrative commentary.

IMR ISSUES, DECISIONS AND RATIONALES

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

Right cervical facet injection at C3-4 and C4-5: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 174-175.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints Page(s): 181.

Decision rationale: As noted in the MTUS-adopted ACOEM Guidelines in Chapter 8, Table 8-8, page 181, facet injections of corticosteroids, are being sought here, are deemed "not recommended." In this case, it is further noted that there is considerable lack of diagnostic clarity also present here. The applicant has had cervical MRI imaging, referenced above, demonstrating severe multilevel neuroforaminal narrowing suggestive of cervical stenosis and/or active cervical radiculopathy. It is further noted that the information in Independent Medical Review packet comprised largely of MRI images, with little to no narrative commentary and/or clinical progress notes attached. The information that is on file, however, seemingly failed to support or substantiate the request. Therefore, the request is not medically necessary.