

Case Number:	CM14-0179211		
Date Assigned:	11/03/2014	Date of Injury:	12/25/2013
Decision Date:	12/09/2014	UR Denial Date:	10/19/2014
Priority:	Standard	Application Received:	10/28/2014

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 low back and knee pain reportedly associated with an industrial injury of December 21, 2013. Thus far, the applicant has been treated with the following: Analgesic medications; transfer of care to and from various providers in various specialties; unspecified amounts of physical therapy; and lumbar MRI imaging of March 4, 2014, notable for degenerative changes, small disk protrusions involving the lumbar spines from the L3 through L5-S1 levels, and disk bulge with bone spurrings at the L5-S1 level generating mild mass effect on the thecal sac with likely contact of the arising left S1 nerve root. In a Utilization Review Report dated October 29, 2014, the claims administrator denied a lumbar epidural steroid injection at the L5-S1 level. Portions of the report appear to have been truncated, as the UR rationale and/or associated guidelines appear to be absent. The claims administrator stated its decision was based on an October 9, 2014 Request for Authorization form. The applicant's attorney subsequently appealed. A November 6, 2014 work status report was notable for comments that the applicant was given a 10-pound lifting limitation and asked to work up to five hours per eight-hour workday. Little to no narrative commentary, however, was attached. In an earlier note dated October 2, 2014, epidural steroid injection therapy was apparently sought. The applicant was again asked to return to work with a 10-pound lifting limitation, for a total for five hours per workday. Again, no narrative commentary was attached. The remainder of the file was surveyed. Little to no narrative commentary was provided in any of the progress notes provided, which comprised almost entirely of MRI reports, x-ray reports, and work status reports. No completed progress notes with narrative commentary or subjective complaints were identified.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 Lumbar Transforaminal Epidural Steroid Injection at RIght L5-S1 x1 as an outpatient:
Upheld

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

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

Decision rationale: While page 46 of the MTUS Chronic Pain Medical Treatment Guidelines does acknowledge that epidural steroid injections are recommended as an option in the treatment of radicular pain, in this case, however, the progress notes and work status reports provided contained little to no narrative commentary. There was no specific mention of low back pain radiating into the legs in a manner consistent with radiculitis or radiculopathy. No completed progress notes were incorporated into the Independent Medical Review packet, which comprised almost entirely of work status reports, x-ray reports, and MRI reports. The information on file, thus, does not support or substantiate the request, as there was no mention of the applicant's having any active radicular complaints on any of the notes which were provided. It was not, furthermore, clearly stated whether the applicant had had a prior epidural injection or not. Therefore, the request is not medically necessary.