

Case Number:	CM14-0212313		
Date Assigned:	01/02/2015	Date of Injury:	12/31/2009
Decision Date:	02/28/2015	UR Denial Date:	12/09/2014
Priority:	Standard	Application Received:	12/18/2014

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: California

Certification(s)/Specialty: Physical Medicine & Rehabilitation

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

Summary 212313 (2/16) occipital nerve blocks The patient is a 58 year old female with an injury date on 12/31/2009. Based on the 10/14/2014 progress report provided by the treating physician, the diagnoses are: 1. DDD (degenerative disc disease) lumbar. 2. Chronic LBP3 Headache. 4. Neck Pain. 5. DDD (degenerative disc disease), cervical. 6. Arthropathy of cervical facet joint. 7. Occipital neuralgia. 8. Knee pain, left. 9. Hip pain, left. 10. Lumbar degenerative disc disease. According to this report, the patient complains of "Pain is currently located head and is dull and aching with the severity at 6/10. The pain is occurring constantly. Her pain radiates from the base of the neck/occipital to the head diffusely and is aggravated by physical activity, standing, sitting and walking. Pain is relieved by massage, resting." Examination findings show "tender below occiput bilaterally." "ROM restricted at back." The patient's work status is "currently not working since February 24, 2014." The 09/10/2014 report indicates the patient "continues to present with occipital cranial pain evaluated by [REDACTED] at the [REDACTED]." Examination findings show "The craniovertebral junction is painful to touch around the occipital nerve more severe on the right than on the left." There were no other significant findings noted on this report. The treatment plan is to perform a Bilateral Occipital Nerve Blocks in the room by the bedside, refill Oxycodone prescription, discussed in detail regarding Occipital Peripheral Nerve Stimulator, and continue PT and score strengthening exercises for back pain. The patient's current medications are Metaxalone, Coxycodone, (Dazidox and Oxycontin), Progesterone, Ropinirole, Valacyclovir, and Zolpidem. The patient's past treatment consists of the "9th back

surgery a few months ago and her back pain is tolerable now. It is her occipital neuralgia which is really bothering her now. She has done well with Occipital nerve blocks in the pasted."
"Patient has pasted surgical history that includes back surgery (7/01/10); hysterectomy (1/1/2001); knee surgery (1/11/1998); and lysis of adhesions (2/1/2008)."The utilization review denied the request for 1 series of two bilateral occipital nerve blocks (one month apart) on12/09/2014 based on the ODG guidelines. The requesting physician provided treatment reports from 04/16/014 to 10/14/2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 series of two bilateral occipital nerve blocks (One month apart): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Treatment Index 11th Edition (web), 2013, Head Chapter, Greater Occipital Nerve Block

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Head chapter for: Greater occipital nerve block (GONB).

Decision rationale: According to the 10/14/2014 report, this patient presents with neck, occipital and head. Per this report, the current request is for 1 series of two bilateral occipital nerve blocks (one month apart). Regarding occipital nerve block, ODG guidelines state "Under study for use in treatment of primary headaches, studies on the use of greater occipital nerve block (GONB) for treatment of migraine and cluster headaches show conflicting results, and when positive, have found response limited to a short-term duration." In this case, the requested procedure is under study per ODG guideline; therefore, the request is not medically necessary.