

Case Number:	CM15-0012038		
Date Assigned:	01/29/2015	Date of Injury:	09/08/2012
Decision Date:	03/18/2015	UR Denial Date:	12/23/2014
Priority:	Standard	Application Received:	01/21/2015

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: Illinois, California, Texas
 Certification(s)/Specialty: Orthopedic Surgery

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 injured worker is a 46 year old male who sustained a work related injury on September 8, 2012, where he sustained back injuries while working as a parking valet. He complained of shooting, stabbing, and burning pain in his lumbar and low thoracic spine, into his hips and buttocks. A Magnetic Resonance Imaging (MRI) on March 29, 2013, revealed a fragmented disc at L5/S1 with no nerve root compromise. Treatment included pain medication, acupuncture, epidural steroid injection, and a transcutaneous electrical nerve stimulation (TENS) unit. The 10/21/14 pain management report indicated the patient underwent right L4/5 and L5/S1 facet joint injections in 9/22/14 with marked improvement in his right sided pain and range of motion for a few days and residual improvement for at least a month. Physical exam documented tenderness to palpation over the lower lumbar facets, pain with extension, pain coming back from forward flexion, and pain worsened with lateral rotation. The patient was diagnosed with chronic non-radicular low back pain, lumbar facet arthropathy, and large L5/S1 disc extrusion with fragmentation and/or sequestration. On December 23, 2014, a request for a service of radiofrequency neurotomy right L3-L4 and L5 dorsal was modified to approve radiofrequency neurotomy for right L4/5 and L5/S1 in Utilization Review, noting the Official Disability Guidelines.

IMR ISSUES, DECISIONS AND RATIONALES

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

Radiofrequency Neurotomy Right L3-L4 and L5 Dorsal: 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 Low Back?Lumbar & Thoracic: Facet joint radiofrequency neurotomy

Decision rationale: The California MTUS guidelines do not provide recommendations for radiofrequency ablation. The Official Disability Guidelines indicate that facet joint radiofrequency neurotomy is under study. Treatment requires a diagnostic of facet joint pain using a medial branch block with initial pain relief of 70%, plus pain relief of at least 50% for a duration of at least 6 weeks. Criteria indicate that no more than 2 joint levels are to be performed at one time. The 12/23/14 utilization review modified the request for radiofrequency neurotomy right L3, L4, and L5 and approved radiofrequency neurotomy at the right L4/5 and L5/S1 consistent with the medial branch blocks that had been successfully performed and consistent with guideline recommendations for 2 levels. There is no compelling reason presented to support the medical necessity of the additional L3 level. Therefore, this request for radiofrequency neurotomy right L3-L4 and L5 dorsal is not medically necessary.