

Case Number:	CM15-0063396		
Date Assigned:	04/20/2015	Date of Injury:	10/23/2003
Decision Date:	05/19/2015	UR Denial Date:	03/09/2015
Priority:	Standard	Application Received:	04/03/2015

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: Texas, New York, California
 Certification(s)/Specialty: Preventive Medicine, Occupational Medicine

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 77-year-old who has filed a claim for chronic low back pain (LBP) reportedly associated with an industrial injury of October 20, 2003. In a Utilization Review report dated March 9, 2015, the claims administrator failed to approve a request for multilevel lumbar facet injections. The claims administrator referenced a March 2, 2015 progress note and associated RFA form in its determination. The applicant's attorney subsequently appealed. On December 11, 2014, the applicant reported ongoing complaints of low back pain radiating to the legs. The applicant's work status was not detailed. Twelve sessions of physical therapy were proposed. In an RFA form, dated March 2, 2015, multilevel lumbar facet injections were proposed. In an associated progress note dated February 26, 2015, the applicant reported ongoing complaints of low back pain with occasional tingling about the legs. Tenderness about the lumbar paraspinal musculature was proposed, in conjunction with multilevel lumbar facet injections. Once again, the applicant's work status was not detailed.

IMR ISSUES, DECISIONS AND RATIONALES

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

L2-L3, L3-L4, L4-L5 bilateral facet injections: Upheld

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints
Page(s): 309.

Decision rationale: No, the request for multilevel lumbar facet injections was not medically necessary, medically appropriate, or indicated here. As noted in the MTUS Guideline in ACOEM Chapter 12, Table 12-8, page 309, facet joint injections, the article at issue, are deemed "not recommended." Here, it is further noted that there was a considerable lack of diagnostic clarity present here. However, the complaints of low back pain radiating to the legs and/or paresthesias about the feet argue against the presence of facetogenic or discogenic low back pain for which facet joint injections could have been considered. Therefore, the request was not medically necessary.