

Case Number:	CM15-0067958		
Date Assigned:	04/15/2015	Date of Injury:	07/22/2014
Decision Date:	05/15/2015	UR Denial Date:	03/10/2015
Priority:	Standard	Application Received:	04/09/2015

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: California

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Pain Management

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 47 year old female, who sustained an industrial injury on 7/22/14. She reported pain in her lower back and right knee due to a slip and fall accident. The injured worker was diagnosed as having lumbar disc displacement without myelopathy. Treatment to date has included physical therapy, chiropractic treatment, a lumbar MRI and pain medications. As of the PR2 dated 2/13/15, the injured worker reports 9.5/10 pain in her lower back that is worse with prolonged standing or sitting. The treating physician noted the lumbar MRI results from 1/23/15 showed lumbar spondylolisthesis at L5-S1 with approximately 4.3mm of anterolisthesis. The treating physician requested a bilateral lumbar facet injection at L5-S1.

IMR ISSUES, DECISIONS AND RATIONALES

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

Bilateral lumbar facet injections L5-S1: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 300, 309. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back Chapter, Facet Joint Injections Topic.

Decision rationale: With regard to this request for lumbar facet injections, the ACOEM Medical Practice Guidelines, 2nd edition, 2004 specifies that facet-joint injections are "Not recommended" in Table 12-8 on page 309 based upon "limited research-based evidence (at least one adequate scientific study of patients with low back pain)." Additionally, page 300 of ACOEM Chapter 12 contains the following excerpt regarding injections: "Invasive techniques (e.g., local injections and facet-joint injections of cortisone and lidocaine) are of questionable merit. Although epidural steroid injections may afford short-term improvement in leg pain and sensory deficits in patients with nerve root compression due to a herniated nucleus pulposus, this treatment offers no significant long term functional benefit, nor does it reduce the need for surgery. Despite the fact that proof is still lacking, many pain physicians believe that diagnostic and/or therapeutic injections may have benefit in patients presenting in the transitional phase between acute and chronic pain." The guidelines found in the California Medical Treatment and Utilization Schedule and ACOEM supersede other guidelines in the Independent Medical Review process. In the case of this injured worker, there is no documentation that the worker is at the transitional phase between acute and chronic pain as this is a long-standing issue. Furthermore, a ESI has been approved according to a progress note on 3/9/15. The outcome of this has yet to be determined and would be important to now prior to a facet injection approval. Given the guidelines, the request for facet injection is not medically necessary.