

Case Number:	CM15-0090424		
Date Assigned:	05/14/2015	Date of Injury:	04/09/2001
Decision Date:	06/17/2015	UR Denial Date:	04/16/2015
Priority:	Standard	Application Received:	05/11/2015

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, California
 Certification(s)/Specialty: Family Practice

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 57 year old male, who sustained an industrial injury on 4/9/2001. Diagnoses have included chronic migraine without aura with intractable migraine and chronic headache disorder. Treatment to date has included Botox injections and medication. According to the progress report dated 4/2/2105, the injured worker complained of headaches rated 8-9/10 prior to Botox injections and 4-5/10 after Botox injections. Headache duration was four to twenty-four hours prior to Botox and less than four hours after Botox. Headache frequency was 15-20/30 days prior to Botox and 5-6/30 days after Botox. The injured worker was noted to be alert and not in distress. He complained of moderate to severe dizziness associated with headaches. Authorization was requested for an occipital nerve block injection. The patient sustained the injury due to MVA. The patient had received Botox injection for this injury. The medication list includes Amerge, Zanaflex, ibuprofen and Meclizine. Per the doctor's note dated 5/14/15 patient had complaints of headache, numbness and sleep apnea Physical examination revealed normal neurological examination, full ROM of the cervical region, and normal sensory and motor examination.

IMR ISSUES, DECISIONS AND RATIONALES

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

Occipital nerve block injection: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, 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 (updated 01/21/15) Neck & Upper Back (updated 05/12/15) Greater occipital nerve block (GONB).

Decision rationale: Per the ODG guidelines cited below, "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. The mechanism of action is not understood, nor is there a standardized method of the use of this modality for treatment of primary headaches. A recent study has shown that GONB is not effective for treatment of chronic tension headache." A recent detailed examination documenting significant functional deficits that would require greater occipital nerve blocks was not specified in the records provided. Physical examination revealed normal neurological examination, full ROM of the cervical region, and normal sensory and motor examination. The response of the headaches to medications for chronic pain like antidepressants or anticonvulsants was not specified in the records provided. As per cited guideline greater occipital nerve block is under study and is not effective for treatment of chronic tension headaches. The request for Occipital nerve block injection is not medically necessary or fully established in this patient.