

MAXIMUS FEDERAL SERVICES, INC.

Independent Medical Review

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Notice of Independent Medical Review Determination

Dated: 11/27/2013

[REDACTED]

[REDACTED]

Employee:	[REDACTED]
Claim Number:	[REDACTED]
Date of UR Decision:	7/30/2013
Date of Injury:	5/21/2010
IMR Application Received:	8/12/2013
MAXIMUS Case Number:	CM13-0010140

- 1) MAXIMUS Federal Services, Inc. has determined the request for **left sided L4/5, L5-S1 lumbar epidural steroid injection is not medically necessary and appropriate.**

INDEPENDENT MEDICAL REVIEW DECISION AND RATIONALE

An application for Independent Medical Review was filed on 8/12/2013 disputing the Utilization Review Denial dated 7/30/2013. A Notice of Assignment and Request for Information was provided to the above parties on 9/17/2013. A decision has been made for each of the treatment and/or services that were in dispute:

- 1) MAXIMUS Federal Services, Inc. has determined the request for **left sided L4/5, L5-S1 lumbar epidural steroid injection** is not **medically necessary and appropriate**.

Medical Qualifications of the Expert Reviewer:

The independent medical doctor who made the decision has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Anesthesia, has a subspecialty in Pain Management and is licensed to practice in California. 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 treatments and/or services at issue.

Expert Reviewer Case Summary:

The client is a 37-year-old presenting with low back and left leg pain following a work related injury on 4/17/2013. The pain is associated with spasms. The physical exam was significant for tenderness and moderate muscle spasms in the left lumbar area and sciatic notch, straight leg raise and Lasegue on each side produces low back pain on each side without sciatica. MRI of the lumbar spine was significant for multi-level degenerative disc disease. The patient was diagnosed with Lumbago. The patient has tried physical therapy and medications including Skelaxin, Naproxen and Theramine. A lumbar epidural steroid injection was recommended.

Documents Reviewed for Determination:

The following relevant documents received from the interested parties and the documents provided with the application were reviewed and considered. These documents included:

- Application of Independent Medical Review
- Utilization Review Determination
- Medical Records from Claims Administrator
- Medical Treatment Utilization Schedule (MTUS)

1) Regarding the request for left sided L4/5, L5-S1 lumbar epidural steroid injection:

The Medical Treatment Guidelines Relied Upon by the Expert Reviewer to Make His/Her Decision

The Claims Administrator based its decision on the Chronic Pain Medical Treatment Guidelines regarding Epidural Steroid Injections, page 46, which is part of the MTUS.

The Expert Reviewer based his/her decision on the Chronic Pain Medical Treatment Guidelines (2009), page 46, which is part of the MTUS.

Rationale for the Decision:

The peer-reviewed medical literature provides evidence for epidural steroid injections in documented cases of nerve root compression or radiculitis. The employee's chronic pain condition is not consistent with such a diagnosis. MTUS Chronic Pain guideline states that the purpose of epidural steroid injections is to reduce pain and inflammation, restoring range of motion and thereby facilitating progress in more active treatment programs, and avoiding surgery. MTUS also states that radiculopathy must be documented by physical examination and corroborated by imaging studies and or electrodiagnostic testing. The employee's presentation does not provide evidence for radiculopathy specifically on physical examination or through electrodiagnostic testing. The employee's physical exam was significant for tenderness and moderate muscle spasms in the left lumbar area and sciatic notch, straight leg raise and Lasegue on each side produces low back pain without sciatica. MRI of the lumbar spine was significant for multi-level degenerative disc disease. There is no documentation of a nerve root compression and a nerve conduction study was not available. **The request for left sided L4/5, L5-S1 lumbar epidural steroid injection is not medically necessary or appropriate.**

Effect of the Decision:

The determination of MAXIMUS Federal Services and its physician reviewer is deemed to be the final determination of the Administrative Director, Division of Workers' Compensation. With respect to the medical necessity of the treatment in dispute, this determination is binding on all parties.

In accordance with California Labor Code Section 4610.6(h), a determination of the administrative director may be reviewed only if a verified appeal is filed with the appeals board for hearing and served on all interested parties within 30 days of the date of mailing of the determination to the employee or the employer. The determination of the administrative director shall be presumed to be correct and shall be set aside only upon proof by clear and convincing evidence of one or more of the grounds for appeal listed in Labor Code Section 4610.6(h)(1) through (5).

Sincerely,

Paul Manchester, MD, MPH
Medical Director

cc: Department of Industrial Relations
Division of Workers' Compensation
1515 Clay Street, 18th Floor
Oakland, CA 94612

/dat

Disclaimer: MAXIMUS is providing an independent review service under contract with the California Department of Industrial Relations. MAXIMUS is not engaged in the practice of law or medicine. Decisions about the use or nonuse of health care services and treatments are the sole responsibility of the patient and the patient's physician. MAXIMUS is not liable for any consequences arising from these decisions.