

Case Number:	CM13-0019359		
Date Assigned:	06/09/2014	Date of Injury:	04/25/2012
Decision Date:	08/11/2014	UR Denial Date:	08/22/2013
Priority:	Standard	Application Received:	09/03/2013

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. The expert reviewer is Board Certified in Occupational Medicine 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 disputed items/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

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 [REDACTED] employee who has filed a claim for chronic neck and shoulder pain reportedly associated with an industrial injury of April 25, 2012. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representation; unspecified amounts of physical therapy; and extensive periods of time off of work. The claims administrator denied a request for epidural steroid injection therapy through a Utilization Review Report dated August 22, 2013. The applicant's attorney subsequently appealed. In a February 19, 2014 progress note, the attending provider noted that the applicant had retired and that she had no intention of returning to work as a bus driver. The applicant was status post Supartz injections, it was stated. In a handwritten note dated April 9, 2014, the applicant was placed off of work, on total temporary disability. Norco was endorsed. The applicant was again placed off of work, on total temporary disability, via an earlier handwritten note of March 11, 2014. In a handwritten progress note dated August 18, 2013, the applicant was placed off of work, on total temporary disability. The applicant presented with shoulder pain, neck pain, and knee pain. Tenderness about the supraspinatus musculature was noted. Cervical epidural steroid injection therapy and three Supartz injections were sought while the applicant was placed off of work. The note was sparse, handwritten, not entirely legible, and extremely difficult to follow.

IMR ISSUES, DECISIONS AND RATIONALES

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

CERVICAL EPIDURAL INJECTION: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Epidural Steroid Injections Page(s): 46.

Decision rationale: While page 46 of the MTUS Chronic Pain Medical Treatment Guidelines does support cervical epidural steroid injections in the treatment of radiculopathy, preferably that which is radiographically and/or electrodiagnostically confirmed, in this case, however, it is unclear whether the applicant was in fact having active complaints of neck pain radiating into the arm suggestive of a cervical radiculopathy. The attending provider's handwritten progress notes did not, furthermore, state whether the injection in question was a diagnostic block, therapeutic block, a first time block, or a repeat epidural block. No clear rationale for the study in question was provided. The multifocal nature of the applicant's complaints, which includes the shoulder, neck, and knees, taken together, argues against any bonafide cervical radiculopathy for which cervical epidural steroid injection therapy would have been indicated. Therefore, the request was not medically necessary.