



# Lumetra

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## Revised Report

**DATE OF REVIEW:** 10-09-07

**IRO CASE #:**

### **DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE**

Lumbar Facet Blocks at the L2, L3, L4, L5, and S1 levels

### **A DESCRIPTION OF THE QUALIFICATIONS FOR EACH PHYSICIAN OR OTHER HEALTH CARE PROVIDER WHO REVIEWED THE DECISION**

Certified by The American Board of Physical Medicine & Rehabilitation

### **REVIEW OUTCOME**

Upon independent review the reviewer finds that the previous adverse determination/adverse determinations should be:

- Upheld (Agree)
- Overturned (Disagree)
- Partially Overturned (Agree in part/Disagree in part)

| Injury date | Claim # | Review Type | ICD-9 DSMV | HCPCS, CPT, NDC Codes | Service Units | Upheld/Overturn |
|-------------|---------|-------------|------------|-----------------------|---------------|-----------------|
|             |         | Prospective | 724.2      | 64476                 | 1             | Upheld          |

### **INFORMATION PROVIDED TO THE IRO FOR REVIEW**

Notice of Determination/Reconsideration dated 09-14-07 & 10-01-07  
 Pre-certification reviews / rationale dated 09-14-07 & 10-01-07  
 Encounter Notes dated 08-09-07  
 Appeal letter dated 09-10-07  
 Texas Workers' Compensation Work Status Report sent 08-09-07  
 ODG Guidelines cited (not provided): Low Back Chapter- Facet Diagnostic  
 Medial Branch

**Notice of Independent Review Decision**  
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**PATIENT CLINICAL HISTORY [SUMMARY]:**

The medical records presented for review begin with a letter of non-certification for a lumbar facet block at L2, L3, L4, L5, and S1 levels. This request was appealed and also was not certified. A third review also non-certified the request. The initial evaluation from a specialist noted a date of injury. There was no single activating event. The onset of low back pain resulted in an epidural steroid injection. The three epidural steroid injections had some positive effect. It would appear that the work hardening program did not result in improvement of the overall clinical situation. In June 2007, a new trial of multiple epidural steroid injections was applied.

**ANALYSIS AND EXPLANATION OF THE DECISION INCLUDING CLINICAL BASIS, FINDINGS AND CONCLUSIONS USED TO SUPPORT THE DECISION**

As noted in the Official Disability Guidelines, there is an indication for these types of blocks. However no more than two levels should be addressed, as one would be unable to identify the exact pain generator. Additionally, the requesting provider indicates he wants to do more than the levels noted above. Therefore, the lumbar facet blocks at the L-2, L-3, L-4, L-5, and S-1 levels were not clinically indicated.

**A DESCRIPTION AND THE SOURCE OF THE SCREENING CRITERIA OR  
OTHER CLINICAL BASIS USED TO MAKE THE DECISION:**

- ACOEM- AMERICAN COLLEGE OF OCCUPATIONAL & ENVIRONMENTAL MEDICINE UM KNOWLEDGEBASE
- AHCPR- AGENCY FOR HEALTHCARE RESEARCH & QUALITY GUIDELINES
- DWC- DIVISION OF WORKERS COMPENSATION POLICIES OR GUIDELINES
- EUROPEAN GUIDELINES FOR MANAGEMENT OF CHRONIC LOW BACK PAIN
- INTERQUAL CRITERIA
- MEDICAL JUDGEMENT, CLINICAL EXPERIENCE AND EXPERTISE IN ACCORDANCE WITH ACCEPTED MEDICAL STANDARDS
- MERCY CENTER CONSENSUS CONFERENCE GUIDELINES
- MILLIMAN CARE GUIDELINES
- ODG- OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES
- PRESSLEY REED, THE MEDICAL DISABILITY ADVISOR
- TEXAS GUIDELINES FOR CHIROPRACTIC QUALITY ASSURANCE & PRACTICE PARAMETERS
- TEXAS TACADA GUIDELINES
- TMF SCREENING CRITERIA MANUAL
- PEER REVIEWED NATIONALLY ACCEPTED MEDICAL LITERATURE (PROVIDE A DESCRIPTION)
- OTHER EVIDENCE BASED, SCIENTIFICALLY VALID, OUTCOME FOCUSED GUIDELINES (PROVIDE A DESCRIPTION)