

Case Number:	CM13-0002511		
Date Assigned:	12/27/2013	Date of Injury:	10/01/2001
Decision Date:	02/11/2014	UR Denial Date:	07/02/2013
Priority:	Standard	Application Received:	07/22/2013

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 a licensed Chiropractor and Acupuncturist 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 claimant is a 68 year old male who was involved in a work related injury on 10/1/01. His diagnoses are chronic pain syndrome, chronic right C6 radiculopathy, bilateral shoulder pain, osteoarthritis of bilateral knees, venous insufficiency, and gastroesophageal reflux disease (GERD). He has had at least twelve acupuncture visits from 5/6/2013-6/19/2013. Per a PR-2 on 6/20/13, he complains of headaches. Prior acupuncture reduced his headaches, improved his range of motion of the head and improved his sleep. Eight additional visits of acupuncture were certified on 7/2/13. There is also request for a vehicle to carry his scooter. Per a UR denial on 11/13/12, the vehicle request was denied because there was lack of documentation on why the claimant would need his scooter to get to and from doctor's appointments. Previous notes on 9/17/2013 indicate that he had a hitch installed on his car to carry his scooter. Per a prior UR denial dated 7/7/13, the vehicle request was denied due to the lack of documentation on why the current hitch could not carry or could not be modified to carry the scooter. The claimant has fallen due to pain last year around November 2011 and chipped a tooth as a result. Other prior treatment includes physical therapy, right shoulder and knee surgery, aquatic therapy, and oral medication.

IMR ISSUES, DECISIONS AND RATIONALES

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

Continue acupuncture; twenty (20) more visits: Upheld

Claims Administrator guideline: Decision based on MTUS Acupuncture Treatment Guidelines, Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: According to evidenced based guidelines, further acupuncture visits after an initial trial are medically necessary based on documented functional improvement. "Functional improvement" means either a clinically significant improvement in activities of daily living or a reduction in work restrictions. Although there was functional improvement, a request of 20 visits exceeds normal guidelines for treatment. Re-evaluation should occur every 2-8 visits in order to assess for functional improvement. Also eight visits were certified on 7/2/13 and there is neither documentation of functional improvement nor completion of those visits. Therefore 20 visits of acupuncture are not medically necessary.

Vehicle to carry power scooter: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Department of Health Care Services-California www.dhcs.cs.gov/services/medi-cal

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Transportation and the Department of Health Care Services-California www.dhcs.cs.gov/services/medi-cal, Criteria for medical transportation

Decision rationale: MTUS does not directly address the purchase of vehicle. However, it does appear that the claimant needs transportation to and from his appointments. It is unclear why he needs a vehicle to transport his scooter in order to get to his doctor's appointments. A purchase of a vehicle is a high cost option and may become un-necessary as the claimant's condition improves or deteriorates. Other options include obtaining rides from wheelchair vans, a rental vehicle, or other pre-arranged rides. At the medical appointments, there should be wheelchairs available as well if the claimant cannot arrive in a wheelchair. A prior denial also questioned why the prior hitch was un-modifiable to use with the scooter. Without further documentation on why a purchase of a vehicle is the only option, the vehicle is not medically necessary.