

Case Number:	CM13-0016605		
Date Assigned:	11/06/2013	Date of Injury:	10/12/2010
Decision Date:	01/21/2014	UR Denial Date:	08/15/2013
Priority:	Standard	Application Received:	08/26/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is Board Certified in Chiropractic Care, has a subspecialty in Acupuncture 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 patient is a 57 year old male with a date of injury of 10/12/2010. According to the progress report dated 6/24/2013, the patient continues to have stiffness, achiness, and discomfort in regards to his knees bilaterally. The patient had an episode 6 weeks ago where his left knee buckled. His symptoms are worsening. The physical findings of his right knee reveals tenderness at the medial joint line with positive McMurray's, tenderness to the patellofemoral articulation with positive patellofemoral crepitation, positive grind test, and pain with deep squat. He has trace effusion and the range of motion is between 0 to 130 degrees.

IMR ISSUES, DECISIONS AND RATIONALES

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

Acupuncture for bilateral knees two (2) times a week for six (6) weeks: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: The patient experienced knee pain. The Acupuncture Medical Treatment Guidelines recommend acupuncture for pain. It recommends a trial of 3-6 sessions to produce functional improvement. There was no documentation that the patient had prior acupuncture treatment and initial trial of acupuncture is warranted at this time. However, the provider's

request for 2 acupuncture session per week for 6 weeks exceeds the recommend guideline for an acupuncture trial. Therefore the request for 12 acupuncture sessions is not medically necessary without documentation of functional improvement.