

Case Number:	CM13-0019058		
Date Assigned:	12/04/2013	Date of Injury:	06/11/1998
Decision Date:	01/17/2014	UR Denial Date:	08/06/2013
Priority:	Standard	Application Received:	09/03/2013

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 Licensed 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.

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 51 year old male with a date of injury of 6/11/1998. The patient has undergone various treatments including physical therapy, acupuncture, and chiropractic treatments. According the progress report dated 7/25/2013, the patient noted that acupuncture has helped dramatically. His left side has improved but the right side is worse due to computer work. The patient is currently receiving hand therapy at [REDACTED] and finds it helpful. Significant objective findings include positive Finkelstein's on the right and negative on the left. He also has a positive Tinel's sign on the right. The patient's has a 70 degree rotation to the left and 80 degrees rotation to the right. The patient was diagnosed with bilateral upper extremity tendinitis strain injury, carpal tunnel syndrome, and right C5-C6 radiculopathy with muscle atrophy of the scapular group. The patient has completed a total of 18 acupuncture sessions.

IMR ISSUES, DECISIONS AND RATIONALES

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

Eight additional acupuncture sessions: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: The Expert Reviewer's decision rationale: The Acupuncture Medical Treatment Guidelines recommends acupuncture for pain. It recommends a trial of 3-6 sessions over 1-2 months to produce functional improvement. Acupuncture treatments may be extended

if functional improvement is documented as defined in section 9792.20(f). The patient complained of upper extremity pain. He has completed a total of 18 acupuncture sessions. There was documentation of subjective improvements in pain from acupuncture. However there was no evidence of objective functional improvement in the submitted records. The request for eight additional acupuncture sessions is not medically necessary or appropriate.