

<b>Case Number:</b>	CM13-0022550		
<b>Date Assigned:</b>	11/13/2013	<b>Date of Injury:</b>	02/10/2009
<b>Decision Date:</b>	01/16/2014	<b>UR Denial Date:</b>	09/06/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/10/2013

### HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician 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 physician 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 has filed a claim for chronic elbow and shoulder pain reportedly associated with cumulative trauma at work, first claimed on February 10, 2009. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representation; transfer of care to and from various providers in various specialties; a reportedly normal electrodiagnostic testing of November 5, 2010; 6 sessions of acupuncture treatment in July 2013; and apparent return to regular duty work. In a utilization review report of September 6, 2013, the claims administrator denied a request for continued acupuncture, apparently on the grounds that the applicant remains on modified duty and has not improved through prior acupuncture. It is incidentally noted that the claims administrator cited the older and now outdated 2007 MTUS Acupuncture Guidelines. A later note of September 25, 2013, is handwritten, not entirely legible, notable for 5/10 elbow pain, tenderness about the lateral epicondyle, and comments that the applicant will continue Naprosyn while returning to regular duty work. An earlier utilization review report of December 28, 2010, is notable for comments that the applicant has had 8 sessions of acupuncture in 2009 and 6 sessions of acupuncture in 2010 authorized. An earlier note of September 4, 2013, is notable for comments that the applicant should continue modified duty work at a rate of 5 hours a day for an additional one month.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**acupuncture once a week for 6 weeks to the right forearm and shoulder: Upheld**

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

**MAXIMUS guideline:** Decision based on MTUS Acupuncture Treatment Guidelines, Chronic Pain Treatment Guidelines Section 9792.20.

**Decision rationale:** As noted in MTUS 9792.24.1.d, acupuncture treatments may be extended if there is evidence of functional improvement as defined in Section 9792.20(f). In this case, however, there is no clear evidence of ongoing functional improvement as defined in Section 9792.20(f) so as to justify additional acupuncture here. The applicant has had unspecified amounts of acupuncture over the life of the claim, including 8 sessions in 2009, 6 sessions in 2010, and 6 sessions in 2012 for a total of at least 20 sessions over the life of the claim. The applicant has, however, seemingly reached a plateau in terms of functional improvement measures established in MTUS 9792.20(f). It appears that the applicant's work status is not improved despite a recent course in acupuncture. Thus, the 6 sessions of acupuncture recently performed in 2013 did not immediately affect any improvement in work status, although it is incidentally noted that the applicant appears to have returned to regular work at a later point in 2013. On balance, however, it appears, for whatever reason, that the applicant has in fact reached a plateau in terms of the functional improvement measures established in MTUS 9792.20(f). Therefore, the request for additional acupuncture is not certified.