

Case Number:	CM13-0026380		
Date Assigned:	12/04/2013	Date of Injury:	07/28/2012
Decision Date:	01/22/2014	UR Denial Date:	08/29/2013
Priority:	Standard	Application Received:	09/19/2013

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 Physical Medicine and Rehabilitation, has a subspecialty in Interventional Spine 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:

This is a 34 year-old, 5'7", 164 lbs, male bartender that reported an injury to his left shoulder on 7/28/12 while he was making a cocktail and shaking it vigorously, he felt a tear in his left shoulder. He also noted right wrist pain.

IMR ISSUES, DECISIONS AND RATIONALES

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

Acupuncture one (1) time a week for six (6) weeks for the right wrist, elbow, and bilateral shoulders: Overturned

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: The Physician Reviewer's decision rationale: The MTUS/Acupuncture medical treatment guidelines state that acupuncture can be used for chronic pain. It states that there should be some evidence of functional improvement within 3-6 visits. The records do not show evidence that the patient ever tried acupuncture in the past. The request for acupuncture x6 sessions appears to be in accordance with the MTUS/Acupuncture guidelines.