

Case Number:	CM13-0036486		
Date Assigned:	12/13/2013	Date of Injury:	10/23/2008
Decision Date:	02/14/2014	UR Denial Date:	10/10/2013
Priority:	Standard	Application Received:	10/21/2013

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 licensed in Chiropractic Care and 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 claimant 66 year old female who was involved in a work related injury on October 28, 2008. Her primary diagnoses are left knee internal derangement, left shoulder impingement syndrome, and lumbar radiculopathy. Per a primary treating physician's progress report (PR-2) dated August 23, 2013; the claimant's symptoms persist in her left shoulder and cervical spine. Prior treatment includes physical therapy, acupuncture, and oral medications. Per a PR-2 on January 24, 2013, the physician notes that acupuncture is improving her symptoms. Per a PR-2 on November 29, 2013, the physician notes that she has benefitted from acupuncture treatment and it has reduced her pain and functionality. Per a PR-2 on October 18, 2012, the physician notes that acupuncture has been helpful in reducing her symptoms. There is no other documentation of improvement and there has been at least 24 acupuncture visits rendered.

IMR ISSUES, DECISIONS AND RATIONALES

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

The request for 12 Acupuncture sessions for the neck: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: According to evidenced based guidelines further acupuncture after an initial trial is medically necessary based on functional improvement. Functional improvement is defined as a clinically significant improvement in activities of daily living, a reduction in work restrictions, or a reduction of dependency on continued medical treatments or medications. The claimant has had at least 24 treatments but the provider has failed to document any objective functional gains. Therefore further acupuncture is not medically necessary or appropriate.

The request for 12 Acupuncture sessions for the back: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: According to evidenced based guidelines further acupuncture after an initial trial is medically necessary based on functional improvement. Functional improvement is defined as a clinically significant improvement in activities of daily living, a reduction in work restrictions, or a reduction of dependency on continued medical treatments or medications. The claimant has had at least 24 treatments but the provider has failed to document any objective functional gains. Therefore further acupuncture is not medically necessary or appropriate.

The request for 12 Acupuncture sessions for the bilateral knees: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: According to evidenced based guidelines further acupuncture after an initial trial is medically necessary based on functional improvement. Functional improvement is defined as a clinically significant improvement in activities of daily living, a reduction in work restrictions, or a reduction of dependency on continued medical treatments or medications. The claimant has had at least 24 treatments but the provider has failed to document any objective functional gains. Therefore further acupuncture is not medically necessary or appropriate.

The request for 12 Acupuncture sessions for the left shoulder: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: According to evidenced based guidelines further acupuncture after an initial trial is medically necessary based on functional improvement. Functional improvement is defined as a clinically significant improvement in activities of daily living, a reduction in work restrictions, or a reduction of dependency on continued medical treatments or medications. The

claimant has had at least 24 treatments but the provider has failed to document any objective functional gains. Therefore further acupuncture is not medically necessary or appropriate.