

<b>Case Number:</b>	CM13-0037583		
<b>Date Assigned:</b>	12/18/2013	<b>Date of Injury:</b>	02/22/2011
<b>Decision Date:</b>	03/04/2014	<b>UR Denial Date:</b>	09/24/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/01/2013

### 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 Chiropractic & 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 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 Claimant is a 78 year old male who was involved in work related injury on 2/22/2011. He has had physical therapy, aquatic therapy, radio frequency ablation, oral medication, and injections. His diagnoses are persistent low back pain; neck pain left wrist pain and left shoulder pain. He currently complains of neck and low back pain with difficulty performing activities of daily living. The claimant has had 10 sessions of aquatic therapy. On 9/10/2013, the physician states that when the claimant can get water therapy on a fairly consistent basis, it increases his overall mobility and ability to exercise, and perform activities of daily living. However there are no objective changes documented. The only other documentation of aquatic therapy results are on 1/28/2013 and the physician states that 4 sessions of aquatic therapy has reduced the claimant's pain.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Eight Aqua Therapy Sessions:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Aquatic Therapy & Physical Medicine Page(s): 22, 98-99.

**Decision rationale:** According to evidenced based guidelines, up to 10 visits of physical therapy are recommended. The claimant has had 8 physical therapy sessions and 10 aquatic therapy sessions. There is no change in objective findings or a reduction of medication with physical/aquatic therapy. The physician states that when the claimant can get water therapy on a fairly consistent basis, it increases his overall mobility and ability to exercise, and perform activities of daily living. However, there is no documentation on the specific functional improvement. "Functional improvement" means either a clinically significant improvement in activities of daily living or a reduction in work restrictions as measured during an exam. The request for aquatic therapy is not medically necessary and appropriate.

**Two acupuncture sessions for neck and 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 visits after an initial trial are medically necessary based on documented functional improvement. "Functional improvement" means either a clinically significant improvement in activities of daily living or a reduction in work restrictions. There has been a trial of six acupuncture visits authorized. However the provider failed to document functional improvement associated with the claimant's acupuncture visits. The request for two acupuncture sessions for the neck and left shoulder is not medically necessary and appropriate.