

Case Number:	CM13-0039319		
Date Assigned:	12/18/2013	Date of Injury:	08/08/2002
Decision Date:	02/28/2014	UR Denial Date:	09/25/2013
Priority:	Standard	Application Received:	10/04/2013

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 Chiropractic 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 is a 58 year old female who was involved in a work related injury on 11/19/1987. Currently, the claimant complains of shooting pain into right upper extremity and right sided neck pain and stiffness. She has pain to palpation in the bilateral trapezius muscles, and positive axial compression and Spurling's test. She has had physical therapy, oral medications, stimulation, and chiropractic treatment. In an appeal dated 7/24/2013, the physician states that the claimant has had 12 sessions of acupuncture. But in the original request for acupuncture, another different provider is requesting an initial trial on 8/20/13. Diagnoses are spinal fusion of C3/C4, cervical sprain/strain, bilateral upper extremity radiculitis, lumbar spine radiculopathy and discopathy, and Achilles tendonitis. It is unclear how many acupuncture visits have been rendered.

IMR ISSUES, DECISIONS AND RATIONALES

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

Acupuncture, 6 total visits (2 visits per week for 3 weeks): Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: According to evidenced based guidelines, further acupuncture visits after an initial trial is only medically necessary with documented functional improvement. It is unclear how many acupuncture visits have been rendered already. The current request states that it is for an initial trial. However, another source indicates that the claimant has had acupuncture in the past. No additional information has been provided and thus, further acupuncture is not medically necessary.