

<b>Case Number:</b>	CM13-0043779		
<b>Date Assigned:</b>	06/11/2014	<b>Date of Injury:</b>	02/12/2003
<b>Decision Date:</b>	07/14/2014	<b>UR Denial Date:</b>	10/23/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/23/2013

### 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 Board Certified in Anesthesiology, has a subspecialty in Pain Medicine and Acupuncture and is licensed to practice in Texas. 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 patient is a 57-year-old female, born on [REDACTED]. She experienced a low back injury from a fall on 02/12/2003, but specific biomechanical history of the injury was not reported. The patient has undergone aquatic therapy, physical therapy, chiropractic treatment, and acupuncture treatments. She has also treated with OTCs, anti-inflammatory and muscle relaxant medications, home exercises, and had been going to a gym in order to lose weight. The clinical documentation provided for this review consisted of the orthopedic re-evaluation record of 10/02/2013. The patient presented on 10/02/2013 with complaints of worsening low back pain during the prior 2 weeks, she denied sustaining any additional specific trauma. The patient was last seen by the orthopedist on 12/07/2012, at which time she had been re-discharged relative to the work-related injury of 02/12/2003. The patient continued to work at her usual and customary duties without apparent adverse effect. A physical examination was performed with findings of tenderness to palpation over the paraspinal musculature and lumbosacral junction, tenderness to palpation over the right sacroiliac joint, negative sacroiliac stress test on the left and positive on the right, decreased lumbar spine ranges of motion in all planes, sensation to pinprick and light touch was intact in bilateral lower extremities, motor testing of the lower extremities revealed no weakness, and lower extremity DTRs were 2+ bilaterally. The patient was diagnosed with lumbar musculoligamentous sprain/strain with bilateral lower extremity radiculitis and two-millimeter disc bulges at L3-L4 and L4-L5 with facet arthropathy at the L3 through L5 levels and bilateral neuroforaminal stenosis from L3 through S1, per MRI scans. There was a request for authorization of a course of acupuncture treatments (2 times per week for 3 weeks) as it had reportedly been beneficial for her lumbar spine in the past.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**ACUPUNCTURE 2X3 LUMBAR:** 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:** The Acupuncture Medical Treatment Guidelines allow a 3-6 visit treatment trial to produce functional improvement, and treatment may be extended if functional improvement is documented with the 3-6 visit treatment trial. Although the patient had treated with prior acupuncture there were no records to provide evidence of functional improvement with care already completed; therefore, additional acupuncture treatment sessions are not supported to be medically necessary.