

<b>Case Number:</b>	CM13-0046276		
<b>Date Assigned:</b>	12/27/2013	<b>Date of Injury:</b>	01/09/2010
<b>Decision Date:</b>	04/18/2014	<b>UR Denial Date:</b>	10/08/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/12/2013

### 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 Chiropractic Care, has a subspecialty in 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 injured worker is a 42 year old male who reported neck, back pain from injury sustained on 01/09/10. Magnetic resonance imaging (MRI) of thoracic and cervical spine revealed multilevel degenerative disc disease. Patient was diagnosed with thoracic degenerative disc disease; cervical disc disease; myalgia and myositis. Patient has been treated with medication, chiropractic and physical therapy. Patient has not had prior acupuncture care. Per notes dated 09/26/13, patient complaints of pain in upper thoracic region; pain is increasing and radiating down to the low back, Patient states a couple of months after the work hardening program, he progressively started to feel pain again. Patient has numbness and tingling in left mid-back. Per notes, treating physician is requesting initial course of acupuncture. Patient would like to continue working fulltime without restriction. Initial six sessions of acupuncture were requested to help the patient get through his most recent flare-up. Patient continues to take medication as prescribed. Exam finding were unremarkable, there is lack of assessment in the provided medical records of objective functional limitations. Patient continues to have pain and works full time without modified duty.

### IMR ISSUES, DECISIONS AND RATIONALES

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

#### **ACUPUNCTURE TWO TIMES A WEEK FOR THREE WEEKS TO THE SPINE:**

Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Acupuncture Treatment Guidelines.

**Decision rationale:** Per California Medical Treatment Utilization Schedule (MTUS) Section 9792.24.1 Acupuncture Medical treatment Guidelines Page 8-9, "acupuncture is used as an option when pain medication is reduced and not tolerated, it may be used as an adjunct to physical rehabilitation and/or surgical intervention to hasten functional recovery". "Time to produce function improvement: 3-6 treatments. 2) Frequency: 1-3 times per week. 3) Optimum duration: 1-2 months. Acupuncture treatments may be extended if functional improvement is documented". Patient has not had prior acupuncture treatment. Acupuncture is used as an option when pain medication is reduced or not tolerated, per progress notes dated 09/26/13, patient continues to take pain medication as prescribed. Additionally, physical exam findings were unremarkable; there is lack of assessment of objective functional limitations. Additional visits may be rendered if the patient has documented objective functional improvement. California Medical Treatment Utilization Schedule (MTUS) Definition 9792.20 (f) "Functional improvement means either a clinically significant improvement in activities of daily living or a reduction in work restrictions as measured during the history and physical exam. Per guidelines and review of evidence, six acupuncture visits are not medically necessary.