

Case Number:	CM13-0054574		
Date Assigned:	12/30/2013	Date of Injury:	05/24/2010
Decision Date:	08/20/2014	UR Denial Date:	11/05/2013
Priority:	Standard	Application Received:	11/19/2013

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 Internal Medicine 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:

This is a 60 year old male with date of injury 5/24/2011 and has low back pain. He has had surgery with an L1 - L5 fusion for radiculopathy, spinal stenosis, and degenerative disc disease. Patient still with pain issues. Comorbid depression is significant and sees psychiatry and psychotherapy. Claimant's regimen for chronic pain has included both opioid and non-opioid medication, TENS, and steroids. Current request is for acupuncture therapy (16 sessions) of the lumbar spine.

IMR ISSUES, DECISIONS AND RATIONALES

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

16 SESSIONS OF ACUPUNCTURE FOR THE LUMBAR SPINE: Overturned

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: Claimant has chronic low back pain failing essentially all standard modalities of care. The claimant has had a failed back surgery and pain and functionality have not improved. He has been on both opioid and non-opioid medications and currently has weaned himself off of chronic narcotics. Based on the failure of all standard therapies and the fact that MTUS guidelines state acupuncture is an option for pain control when pain medication does not

work or is reduced, the current request for 16 sessions of acupuncture therapy is medically necessary.