

Case Number:	CM13-0057546		
Date Assigned:	12/30/2013	Date of Injury:	04/03/2009
Decision Date:	06/09/2014	UR Denial Date:	11/15/2013
Priority:	Standard	Application Received:	11/25/2013

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 Orthopedic Surgery and is licensed to practice in Oklahoma and 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 sustained an injury to her bilateral shoulders/hands on 04/03/09 when she picked-up a magazine bundle and felt severe pain. The patient was diagnosed with bilateral rotator cuff injuries and bilateral carpal tunnel syndrome. At the patient subsequently underwent carpal tunnel release on 06/26/09 and right shoulder arthroscopy on 10/09/09, followed by left shoulder rotator cuff repair on 05/04/10.

IMR ISSUES, DECISIONS AND RATIONALES

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

ACUPUNCTURE FOR THE BILATERAL SHOULDERS AND HANDS (1 TIME PER WEEK FOR 6 WEEKS): Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: The CAMTUS recommends up 3 to 6 treatments to produce effect with an optimum duration of 1-2 months. The records indicate that the injured worker was approved for an initial regimen of 6 acupuncture therapy visits that provided some benefit. There is no additional significant objective clinical information that supports the need to exceed the CAMTUS recommendations, either in frequency or duration of acupuncture therapy visits. There

was no indication that injured worker is actively participating in a home exercise program. Given the clinical documentation submitted for review, medical necessity of the request for acupuncture for the bilateral shoulders and hands (1 x week x 6 weeks) has not been established. Therefore, the request for acupuncture for the bilateral shoulders and hands (1 times per week for 6 weeks) is not medically necessary and appropriate.