

Case Number:	CM13-0057926		
Date Assigned:	12/30/2013	Date of Injury:	09/06/2011
Decision Date:	03/26/2014	UR Denial Date:	11/05/2013
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 licensed 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 patient is a 41 year old male with pain complains of the left knee and lower back. Diagnoses include lumbar disc displacement. Previous treatments have included epidural injections, oral medication, chiropractic care, physical therapy, work modifications, and 39 sessions of acupuncture, amongst others. The patient continues being significantly symptomatic, with reduced function in activities of daily living.

IMR ISSUES, DECISIONS AND RATIONALES

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

Additional acupuncture twice a week for four 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: Despite undergoing extensive acupuncture care in the past, the patient continues to be significantly symptomatic, totally disabled, and taking oral medication without any objective improvements documented (improvement in function or activities of daily living, medication reduction, reduction of work restrictions, etc.). Mandated guidelines state that acupuncture care could extended if functional improvement is documented as either a clinically significant improvement in activities of daily living or a reduction in work restrictions and a

reduction in the dependency on continued medical treatment. Without evidence of a significant, sustained quantifiable response to treatment obtained with previous acupuncture care and the extraordinary circumstances to support a number of sessions exceeding the guidelines, the request for additional acupuncture is not supported; the request is noncertified.