

Case Number:	CM13-0059224		
Date Assigned:	12/30/2013	Date of Injury:	10/05/2011
Decision Date:	03/18/2014	UR Denial Date:	11/22/2013
Priority:	Standard	Application Received:	12/01/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified 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 physician 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 applicant is a represented [REDACTED] employee who has filed a claim for chronic pain syndrome, chronic facial pain, chronic neck pain, anxiety, depression, hearing loss, and facial injuries reportedly sustained in an industrial injury of October 5, 2011. Thus far, the applicant has been treated with the following: analgesic medications; attorney representation; 42 prior sessions of acupuncture, sleep aids; psychological counseling; and extensive periods of time off work, on total temporary disability. In earlier notes of July 11, 2013, and June 24, 2013, the applicant was described as using Ambien, Celebrex, Lyrica, and Tylenol. An earlier note of August 26, 2013, was again notable for comments that the applicant was off work, on total temporary disability. The applicant was having heightened complaints of anxiety, depression, and psychological stress. According to a September 30, 2013, progress note the applicant continued to have active symptoms of posttraumatic stress disorder. The applicant reported high levels of fearfulness, anxiety, stress, and poor mood. The applicant further stated that she was having difficulty sleeping, but noted that she had been able to attend the gym on a heightened basis. The applicant stated that ongoing usage of acupuncture energized her, improved her mood, and improved her ability to sleep. The applicant was still on Lyrica, Ambien, Celebrex, and Tylenol. An additional 6 sessions of acupuncture were sought while the applicant was again placed off work, on total temporary disability. According to an October 24, 2013, progress note the applicant reported persistent ear pain, depression, dental pain, and facial pain. The applicant is using liquid Paxil for depression and is still exhibiting a depressed mood and affect. In a utilization review report dated November 22, 2013, the claims administrator denied a request for six additional sessions of acupuncture, citing the extensive amounts of acupuncture the applicant had previously had. The applicant's attorney subsequently appealed.

IMR ISSUES, DECISIONS AND RATIONALES

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

SIX SESSIONS OF ACUPUNCTURE, ONE TO TWO TIMES A WEEK, AROUND THE ORAL CAVITY: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: According to the California MTUS Guidelines, acupuncture treatments can be extended if there is evidence of functional improvement. In this case, however, the applicant is off work, on total temporary disability. The applicant remains highly reliant on multiple medications, including Ambien, Celebrex, Tylenol, and Lyrica. The applicant's symptoms of pain, depression, anxiety, and fearfulness, seemingly persist. All of the above, taken together, imply a lack of functional improvement despite completion of 42 earlier sessions of acupuncture. Therefore, the request for six additional sessions of acupuncture is not medically necessary.