

<b>Case Number:</b>	CM13-0065384		
<b>Date Assigned:</b>	01/03/2014	<b>Date of Injury:</b>	02/18/2009
<b>Decision Date:</b>	06/30/2014	<b>UR Denial Date:</b>	12/04/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	12/13/2013

### 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 Acupuncture, has a subspecialty in Addiction Detoxification and is licensed to practice in New York. 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 applicant is a male employee who has filed a claim for an injury to his upper extremities with radiculopathy, neuritis, and neuralgia. The incident occurred on 2/18/09. The mechanism of injury is unclear in the records reviewed. The treating physician's most recent report dated 11/21/13 documents the applicant complains of pain in multiple sites. He complains of chronic, severe right shoulder, lower back, neck and knee pain. He continues to have radiating pain in his upper extremities too. At this examination, the claimant exclaimed medical marijuana does not help with his pain and would like to add another medication to help with the pain. The applicant is off work until February 2014. Since the incident, the applicant's treatments consisted of, but not limited to, orthopedic care, occupational surgery, physical therapy and rehabilitation, EMG/NCV diagnostic study, multiple MRIs and X-rays, pain and anti-inflammatory medications. He is status-post multiple surgeries and procedures including; right shoulder arthroscopy in 2009, right Carpal Tunnel Release in 2011 and bilateral Cubital Tunnel Surgery. On 11/25/13, the treating physician requested twelve initial acupuncture sessions for the applicant. In the utilization review report, dated 12/4/13, the UR determination was unable to approve these twelve acupuncture sessions in light of California MTUS guidelines for Acupuncture care, where "acupuncture is used as an option when pain medication is reduced or not tolerated, it may be used as an adjunct to physical rehabilitation and/or surgical intervention to hasten functional recovery." Besides the medical marijuana, the treating physician has not provided clinical data that the applicant reduced his medication.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**ACUPUNCTURE TIMES 12 SESSIONS TO TREAT THE RIGHT UPPER EXTREMITY: Upheld**

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

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

**Decision rationale:** Initial acupuncture care is evaluated utilizing the California MTUS guidelines for acupuncture medical treatment. California MTUS recommends an initial trial of 3-6 visits of acupuncture. Additionally, California MTUS states "acupuncture is used as an option when pain medication is reduced or not tolerated; it may be used as an adjunct to physical rehabilitation and/or surgical intervention to hasten functional recovery." Further acupuncture, beyond this initial trial will be considered based on "functional improvement", as defined by California MTUS. There is no clinical data provided by the treating physician regarding a decrease or intolerance to her medication, recent involvement in physical rehabilitation program or recent surgical intervention. Furthermore, there is no evidence that this claimant received acupuncture previously. Therefore, given the California MTUS guidelines for acupuncture care detailed above, including the initial trial that is less than twelve visits, the original request of twelve sessions of acupuncture is not medically necessary.