

Case Number:	CM13-0065725		
Date Assigned:	01/03/2014	Date of Injury:	06/01/2009
Decision Date:	06/23/2014	UR Denial Date:	11/14/2013
Priority:	Standard	Application Received:	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 Occupational 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 41 year old female who has reported the gradual onset of neck and extremity pain attributed to usual work activity, with a date of injury listed as 6/01/2009. She has been diagnosed with degenerative joint disease, disc pathology, radiculopathy, ulnar neuropathy, and mental illness. Treatment has included specialist referrals, medications, cervical fusion surgery, and psychotherapy. Acupuncture was prescribed previously but the injured worker did not attend. On 10/7/13 the primary treating physician described increasing pain and numbness, lack of efficacy of medications, spasm, tenderness, limited range of motion, and listed multiple diagnoses. The treatment plan included cervical spine MRI, acupuncture for 8 visits, and no work status. Function was not discussed other than stating that pain is present when moving from bed and that pain is "almost debilitating". The 11/14/13 PR2 is largely the same. On 11/14/13, Utilization Review non-certified an initial course of acupuncture, noting the lack of documented functional deficits, excessive quantity of visits, and lack of indications; all parts of the decision were supported by MTUS citations. This Utilization Review decision was appealed for an Independent Medical Review.

IMR ISSUES, DECISIONS AND RATIONALES

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

ACUPUNCTURE TWO (2) TIMES A WEEK FOR FOUR (4) WEEKS FOR THE CERVICAL SPINE: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: ACUPUNCTURE MEDICAL TREATMENT GUIDELINES

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: The prescription for acupuncture is evaluated in light of the MTUS recommendations for acupuncture. Per the MTUS, 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. The treating physician has stated that pain medications were not effective. An initial course of acupuncture is 3-6 visits per the MTUS. The prescription is for 8 visits, which exceeds the quantity recommended in the MTUS. Function was not addressed. Per the MTUS, the goal of all chronic pain treatment is "functional improvement", in part because chronic pain cannot be cured. Given that the focus of acupuncture is functional improvement, function (including work status or equivalent) must be addressed as a starting point for therapy and as a measure of progress. An initial course of acupuncture is not medically necessary based on a prescription which exceeds the quantity recommended in the MTUS, and lack of a sufficient treatment plan as per the MTUS recommendations for treating chronic pain. The request is not medically necessary or appropriate.