

Case Number:	CM13-0066475		
Date Assigned:	01/03/2014	Date of Injury:	09/17/2011
Decision Date:	05/29/2014	UR Denial Date:	12/06/2013
Priority:	Standard	Application Received:	12/16/2013

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 Physical Medicine and Rehabilitation, has a subspecialty in Interventional Spine 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 case involves a 45 year-old female who was injured on 9/17/2011. On 12/6/13 [REDACTED] UR reviewed medical reports dated 11/8/13, and RFAs dated 10/21/13 and 12/1/13. The UR letter modifies the request for acupuncture 2x6 to allow 6 sessions. Unfortunately, the medical report completed on 11/8/13 and 12/1/13 request for authorization was not available for this IMR. The most recent report is dated 10/7/13, and notes the patient complaints of bilateral foot pain. The diagnosis is RSD of lower limb. The plan was for MMDI at [REDACTED].

IMR ISSUES, DECISIONS AND RATIONALES

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

6 SESSIONS OF ACUPUNCTURE: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: The request for acupuncture x6 sessions for bilateral foot pain has been reviewed. The 11/8/13 medical report that UR used to make the decision was not provided for this IMR. The UR letter states the request was for acupuncture 2x6 or 12 sessions, and they modified it to allow the trial of 6 sessions. There is no reporting available for this IMR that

discusses the outcome of the initial 6-sessions of acupuncture. MTUS/Acupuncture treatment guidelines, state that if acupuncture is to be effective, there should be evidence of functional improvement within the first 6 sessions. The guidelines state that acupuncture sessions can be extended if there is documentation of functional improvement. Based only on the available reports, there is no reporting on efficacy of the initial acupuncture sessions. The request for additional 6 sessions of acupuncture without documentation of functional improvement with the initial sessions, is not in accordance with the MTUS/Acupuncture guidelines.

MENTAL MUSCLE DIAGRAM INDICATOR (MMDI): Upheld

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Non- MTUS Citation: Other Medical Treatment Guideline or Medical Evidence.

Decision rationale: The patient presents with bilateral foot pain. MMDI was reviewed a career guide/personality test. This was requested on the 10/7/13 report because there was no response to her stim trial. There is no rationale provided for the MMDI. MTUS/ACOEM, ODG did not discuss the MMDI. In this case, the highest ranked standard is likely (D) Expert opinion or (E) generally accepted standards of medical practice. The MMDI is not the generally accepted standard of medical practice for treating bilateral foot pain or RSD.