

Case Number:	CM13-0071974		
Date Assigned:	01/17/2014	Date of Injury:	08/05/2011
Decision Date:	06/06/2014	UR Denial Date:	12/16/2013
Priority:	Standard	Application Received:	12/30/2013

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 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 78 year old male patient with chronic neck and lower back pain complains. Diagnoses included lumbago. Previous treatments included: oral medication, physical therapy, and acupuncture care (six sessions were rendered, gains were reported as "helpful") amongst others. As the patient continued symptomatic, a request for six additional acupuncture sessions was made on 12-02-13 by the PTP. The requested care was denied on 12-16-13 by the UR reviewer. The reviewer rationale was "no discussion of efficacy with prior acupuncture x6, in addition considering the very chronic nature of the condition and the lack of documented sustained functional improvement, the additional acupuncture requested is not supported by the MTUS as medically and necessary".

IMR ISSUES, DECISIONS AND RATIONALES

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

EXT - ACUPUNCTURE X6: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: Current Acupuncture Medical Treatments Guidelines read extension of acupuncture care could be supported for medical necessity "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." Although six prior acupuncture sessions rendered were reported as "helpful", no evidence of sustained, significant, objective functional improvement (quantifiable response to treatment) was provided to support the reasonableness and necessity of the additional acupuncture requested. Therefore, the additional acupuncture time 6 is not medical necessary.