

Case Number:	CM14-0003139		
Date Assigned:	01/31/2014	Date of Injury:	02/10/2006
Decision Date:	06/19/2014	UR Denial Date:	12/23/2013
Priority:	Standard	Application Received:	01/09/2014

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 Family Practice and is licensed to practice in Texas. 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 injured worker is a 58 year old male who reported an injury on 02/01/2006 secondary to unknown mechanism of injury. The diagnoses included lumbar and cervical degeneration with radiculitis and low back pain. The injured worker was evaluated on 11/14/2013 for reports of continued low back pain. The exam noted no evidence of objective findings of functional limitations or pain level. The treatment plan included continued medication therapy, interdisciplinary pain management program and tai chi exercises. The request for authorization dated 11/14/2013 is in the documentation provided.

IMR ISSUES, DECISIONS AND RATIONALES

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

SIX (6) TAI-CHI SESSIONS FOR THE CERVICAL AND LUMBAR SPINE: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Chapter: Pain (Updated 11/14/13) Tai Chi.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain, Tai Chi.

Decision rationale: The Official Disability Guidelines (ODG), recommend Tai Chi as an exercise-therapy option for arthritis, and for fibromyalgia. The results of a new analysis have

provided good evidence to suggest that Tai Chi is beneficial for chronic pain from arthritis. However, there is a lack of objective evidence of an arthritis or fibromyalgia diagnosis, In addition, there are no functional deficits or pain levels to indicate a need for an exercise therapy program. Therefore, based on the documentation provided, the request is not medically necessary.