

<b>Case Number:</b>	CM14-0007141		
<b>Date Assigned:</b>	02/07/2014	<b>Date of Injury:</b>	10/16/2007
<b>Decision Date:</b>	06/23/2014	<b>UR Denial Date:</b>	12/24/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/20/2014

### 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 licensed 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 female employee who has filed an industrial claim for lumbar and cervical spine pain with radiculopathy to upper and lower extremities including bilateral wrists. Additional diagnoses include right carpal tunnel syndrome and she is post right shoulder and elbow arthroscopic surgery in 2010. On October 29, 2013, at her pain management follow up, her pain level is an 8/10. The applicant injured herself on 10/16/07 when she fell off her chair while adjusting her seat. Treatment to date has included physical therapy with other modalities, back epidural steroid injections, multiple MRI's, X-rays, aquatic therapy, orthopedic care, tens unit, pain medication and anti-inflammatory medication, and hot/cold packs. Claimant, as of September 23, 2013 based on the treating physician's report, has returned to work with restrictions and is taking fewer medications. In the utilization review report, dated 12/24/13, the UR determination did not approve the eight sessions of acupuncture requested. The denial is in light of the MTUS guidelines that recommend acupuncture as an option when pain medications are not tolerated or reduced, prescribed in conjunction to a physical rehabilitation program, or to hasten recovery after surgery. Additionally, MTUS recommends 3-6 visits to determine if there is functional improvement before extending the treatment further. There is a lack of clinical evidence, recent evidence, that the applicant does not tolerate medication, is involved in a physical rehabilitation program (recently) or has had a recent surgery, therefore the physician advisor did not certify the 8 sessions of acupuncture.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**8 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:** Initial acupuncture care is evaluated utilizing the MTUS guidelines for acupuncture medical treatment. MTUS recommends an initial trial of 3-6 visits of acupuncture. Additionally, 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 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 has had surgery prior to this request. Therefore, given the MTUS guidelines for acupuncture care detailed above and the fact that the recommended initial trial is considerably less than eight visits requested, acupuncture care is not medically necessary.