

<b>Case Number:</b>	CM14-0103682		
<b>Date Assigned:</b>	07/30/2014	<b>Date of Injury:</b>	10/16/2013
<b>Decision Date:</b>	09/03/2014	<b>UR Denial Date:</b>	06/11/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/07/2014

### 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 a Licensed Chiropractor and Acupuncturist 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 injured worker is a 32 year old female who reported low back pain from injury sustained on 10/16/13 after she reached to put dishes on the shelf above her head. MRI of the lumbar spine revealed L4-5 and L5-S1 minimal disc bulging. Patient is diagnosed with lumbago, lumbar sprain/strain, thoracic sprain/strain, unspecified myalgia and myositis. Patient has been treated with medication, therapy and acupuncture. Per medical notes dated 01/03/14, patient states the pain is always there but she feels better and states pain is worse depending on what she is doing throughout the day. Patient has tenderness to palpation of lumbar paraspinal muscles. Per medical notes dated 02/17/14, patient states she has been going for acupuncture and states it has been helping her. Per medical notes dated 03/03/14, patient complains of low back pain. Patient finished acupuncture and states it made a huge difference in her pain. Per medical notes dated 05/23/14, patient complains of low back pain rated at 4/10. Naproxen has been helpful in decreasing her pain by 50%. Provider is requesting additional 6 acupuncture treatments.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Acupuncture 6 Visits, Lumbar:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** Decision based on MTUS Acupuncture Treatment Guidelines.

**Decision rationale:** Per Acupuncture Medical Treatment Guidelines acupuncture is used as an option when pain medication is reduced and not tolerated, it may be used as an adjunct to physical rehabilitation and/or surgical intervention to hasten functional recovery". "Time to produce function improvement: 3-6 treatments. 2) Frequency: 1-3 times per week. 3) Optimum duration: 1-2 months. Acupuncture treatments may be extended if functional improvement is documented". Patient has had prior acupuncture treatment. Per medical notes dated 02/17/14, "she has been going for acupuncture and states it has been helping her". Per medical notes dated 03/03/14, "patient finished acupuncture treatment and states it made a huge difference in her pain". There is lack of evidence that prior acupuncture care was of any functional benefit. There is no assessment in the provided medical records of functional efficacy with prior acupuncture visits. Medical reports reveal little evidence of significant changes or improvement in findings, revealing a patient who has not achieved significant objective functional improvement to warrant additional treatment. Additional visits may be rendered if the patient has documented objective functional improvement. Per MTUS guidelines, Functional improvement means either a clinically significant improvement in activities of daily living or a reduction in work restrictions as measured during the history and physical exam or decrease in medication intake. Per review of evidence and guidelines, additional 6 acupuncture treatments are not medically necessary.