

Case Number:	CM14-0106906		
Date Assigned:	08/01/2014	Date of Injury:	02/01/2013
Decision Date:	09/23/2014	UR Denial Date:	06/12/2014
Priority:	Standard	Application Received:	07/10/2014

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 Chiropractic and 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:

The injured worker is a 51 year old male who reported bilateral elbow pain from injury sustained on 02/01/13 due to cumulative trauma. There were no diagnostic imaging reports. Patient is diagnosed with bilateral medial and lateral epicondylitis. Patient has been treated with medication, therapy and cortisone injection. Per medical notes dated 06/09/14, patient complains of bilateral elbow pain, surgery pending and reports no changes of symptoms. Medication helps for pain and swelling. Per medical notes dated 07/09/14, patient complains of bilateral elbow pain. Surgery for bilateral elbow is pending. He states his right wrist is starting to hurt. He complains of constant pain in bilateral elbows. Examination revealed tenderness to palpation of the lateral and medial epicondyle. Provider is requesting 6 acupuncture treatments for the left elbow. It is unclear if the request is for initial trial or for additional treatment. There is no assessment in the provided medical records of functional efficacy with prior acupuncture visits (if any administered).

IMR ISSUES, DECISIONS AND RATIONALES

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

6 Sessions of Acupuncture to the left elbow: Upheld

Claims Administrator guideline: Decision based on MTUS Acupuncture Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines, Elbow chapter.

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: Per MTUS- Section 9792.24.1 Acupuncture Medical treatment Guidelines page 8-9. "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". It is unclear if the patient has had prior acupuncture treatment or if the request is for initial trial. Acupuncture is used as an option when pain medication is reduced or not tolerated which was not documented in the provided records. Acupuncture can be used as an adjunct to physical rehabilitation or surgical intervention to hasten functional recovery. The patient is reported to be pending surgery; however the request for acupuncture post op is premature as the patient hasn't had surgical intervention. There is no assessment in the provided medical records of functional efficacy with prior acupuncture visits (if any administered). 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, 6 acupuncture treatments for left elbow are not medically necessary.