

Case Number:	CM14-0107367		
Date Assigned:	08/01/2014	Date of Injury:	07/05/2013
Decision Date:	09/19/2014	UR Denial Date:	06/11/2014
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 Board Certified 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 purpose of this review is to consider additional eight acupuncture sessions. The applicant is a female employee who has filed an industrial claim for cervical spine and right shoulder injury that occurred on 7/5/13. Mechanism of injury is unspecified in the records reviewed. Currently the patient complains of continual pain and reduction in function. On 5/22/14, the treating physician requested an additional eight sessions of acupuncture to treat her pain and to reduce some of her symptoms. The applicant complains of severe pain in her neck and right shoulder with traveling numbness and tingling to the right arm. The applicant has received prior acupuncture care. Her working status is with limitations and restrictions. Her diagnosis consists of right shoulder sprain. Her treatment to date includes, but is not limited to, MRI's, X-rays, acupuncture, physical therapy, EMG/NCV studies, elbow sleeve, oral and topical pain and anti-inflammatory medications. In the utilization review report, dated 6/11/14, the UR determination did not approve the eight sessions of acupuncture in light "functional improvement", as defined by MTUS. Although the records state the patient achieved relief with pain, the records lack clinically significant improvement in activities of daily living or a reduction in work restrictions and/ or a reduction of medical treatment dependency.

IMR ISSUES, DECISIONS AND RATIONALES

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

Acupuncture 2 times a week for 4 weeks: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: Evaluating a request for additional acupuncture is based on the MTUS recommendations for acupuncture, which includes the definition of "functional improvement". In the documentation provided, there is no evidence that this claimant received acupuncture previously, however a request submitted was in April 2014 for eight sessions, but the documentation, either factual or implied of such visits happening do not exist. Assuming acupuncture care occurred prior, medical necessity for any further acupuncture treatments is in light of "functional improvement". After combing through provided medical records it is evident, the treating physician neglected to provide clinically significant improvement in the applicant's daily living or a reduction in work restrictions or a decrease in medical dependency. Therefore, these additional eight sessions of acupuncture therapy is not medically necessary based on the lack of functional improvement, as defined by MTUS. Furthermore, if the current acupuncture prescription were to be considered an initial trial, the MTUS recommends 3-6 visits as time allowed to produce functional improvement, thus in excess and not medically necessary as such.