

Case Number:	CM14-0010747		
Date Assigned:	02/21/2014	Date of Injury:	06/18/1998
Decision Date:	06/25/2014	UR Denial Date:	12/26/2013
Priority:	Standard	Application Received:	01/27/2014

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 63-year-old male who reported low back pain from injury sustained on 6/18/98 due to a fall. MRI of the lumbar spine revealed possible abscess at L5-S1. Patient has been diagnosed with lumbago and lumbar post laminectomy syndrome. He has been treated with medication, aquatic therapy, surgery, physical therapy and acupuncture. Patient was seen for a total of 18 acupuncture visits. Per notes dated 12/12/13, patient complains of low back pain and left leg pain with numbness and tingling. Pain is rated at 6-7/10. Primary treating physician is requesting additional 6 acupuncture treatments which were denied due to lack of documented functional improvement. Per notes, "He states that he was able to make himself a sandwich and he was able to put his pants on by himself after 4 sessions which he was not able to do before acupuncture". "After 12 acupuncture sessions he was able to attend a Christmas party and able to decrease fentanyl to 50 from 75". There is assessment in the provided medical records of functional efficacy with prior acupuncture visits. 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 decreased medication intake.

IMR ISSUES, DECISIONS AND RATIONALES

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

ACUPUNCTURE 2X3 WEEKS: Overturned

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

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". Patient has had prior acupuncture 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. Per primary care progress notes the patient had improvement in activities of daily living with acupuncture treatments. He was able to decrease his medication intake to 50 from 75. Per review of evidence and guidelines, 2x3 acupuncture treatments are medically necessary.