

Case Number:	CM14-0015477		
Date Assigned:	02/28/2014	Date of Injury:	09/12/2008
Decision Date:	06/30/2014	UR Denial Date:	02/03/2014
Priority:	Standard	Application Received:	02/06/2014

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 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:

Claimant is a 67 year old female who sustained a work related injury on 9/12/2008. Per a Pr-2 dated 1/15/2014, the claimant has sharp, dull, burning constant pain in the left neck to the top of shoulder blade and back. She has tingling and pain all the time, radiating down to her shoulder and back fo the shoulder blade. It is worse with lifting, walking more than 45 minutes. Acupuncture has had the most benefit. Prior treatment includes acupuncture, chiropractic, physical therapy, and oral medication. Per a PR-2 dated 8/28/2013, the claimant reports that acupuncture decreases her pain, headaches, and increases her function. Per a PR-2 dated 10/11/2013, the claimant reports that acupuncture allows her to move easier, have less headaches, bike and walk longer, and allows her to be more relaxed. Her diagnoses are cervical sprain, cervical spondylosis, facet arthropathy, cervical myofascial pain syndrome, left shoulder bursitis, left rotator cuff tendonitis, acromioclavicular joint dengerative change, left hand cmc degenerative joint disease, left radial ulnar degenerative joint disease, cervicogenic headaches, and history of dental trauma. The claimant has had 24 prior acupuncture sessions. On the acupuncture notes submitted, the claimant answers yes to acupuncutre decreasing pain, helping her sleep better, allowing her to take less oral medication, and increase her level of function. However in the last three sessions from 1/20/2014-2/5/2014, her pain levels haave increased from 4-5/10 to 7/10.

IMR ISSUES, DECISIONS AND RATIONALES

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

ADDITIONAL ACUPUNCTURE TIMES 12 SESSION FOR THE CERVICAL SPINE:

Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: ACUPUNCTURE MEDICAL TREATMENT GUIDELINES, ,

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: ACUPUNCTURE MEDICAL TREATMENT GUIDELIENS, ,

Decision rationale: According to evidenced based guidelines, further acupuncture visits after an initial trial are medically necessary based on documented functional improvement. "Functional improvement" means a clinically significant improvement in activities of daily living or a reduction in work restrictions, medication, or dependency on continued medical treatment. The claimant has had 24 sessions of acupuncture, however the provider failed to document objective functional improvement associated with the completion of her acupuncture visits. The claimant reports subjective improvement with acupuncture, but there are no objective measures of improvement submitted. In regards to the last three acupuncture visits, the pain level has even increased. Therefore further acupuncture is not medically necessary.