MAXIMUS Federal Services

| Case Number: | CM14-0121573 | | |
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| Date Assigned: | 08/06/2014 | Date of Injury: | 07/01/2002 |
| Decision Date: | 09/11/2014 | UR Denial Date: | 07/11/2014 |
| Priority: | Standard | Application Received: | 07/29/2014 |

## 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 Physical Medicine and Rehabilitation 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 53-year-old-female who sustained injury on 07/01/02. The mechanism of injury was not mentioned. She is noted to have neck and upper back pain that is aggravated when she tries to lift her arm and to reach out. Specifically; turning her head to the right side makes her neck pain worse. On exam, there is tenderness in her occiput unilaterally and the area between C2 and C5 paraspinal muscles on the right side. The right side of neck pain and pulling pain are worse when she does right side flexion and rotation of neck. There is tenderness in the area between T4 and T8 paraspinal muscle on the right side. Diagnoses include neck pain and right shoulder pain.PTP progress report dated 06/12/2014: subjective complaints; the patient has neck pain. Yoga therapy helped neck pain decrease and movement increase. Objective findings are tightness on shoulder area, normal motor and diagnoses of neck pain and upper back pain. The treatment plan is OTC Tylenol and continues Yoga Therapy. UR determination for Additional Yoga Therapy x 12 visits unspecified duration/frequency is denied.

## IMR ISSUES, DECISIONS AND RATIONALES

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

**Additional Yoga Therapy x 12 visits unspecified duration/frequency:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Pain, Physical Medicine Treatment, Yoga.

**Decision rationale:** Per ODG Guidelines, Yoga is recommended as an option only for select, highly motivated patients. There is considerable evidence of efficacy for mind-body therapies such as yoga in the treatment of chronic pain. Also, the impact on depression and disability could be considered as important outcomes for further study. Since outcomes from this therapy are very dependent on a highly motivated patient, we recommend approval where requested by a specific patient, but not adoption for use by any patient. Women with fibromyalgia can reduce symptoms of the disease and improve their function by practicing the mind-body techniques of yoga, a new RCT concludes. The results suggested that yoga led to a beneficial shift in how patients cope with pain, including greater use of adaptive pain-coping strategies, such as engaging in activities despite pain, acceptance of their condition, the use of religion as a coping mechanism, and the ability to relax. A meta-analysis suggests that yoga is a useful supplementary approach with moderate effect sizes on pain and associated disability, and even short-term interventions might be effective. The criteria for the number of treatments falls under the physical therapy guidelines; Allow for fading of treatment frequency (from up to 3 visits per week to 1 or less), plus active self-directed home Physical Medicine. For neck pain guidelines allow 9-10 visits over 8 weeks. However, the request is for 12 Yoga sessions which exceeds the criteria recommendations. Request for additional 12 yoga therapy visits is not medically necessary.