

Case Number:	CM14-0161414		
Date Assigned:	10/06/2014	Date of Injury:	05/24/2010
Decision Date:	11/04/2014	UR Denial Date:	09/08/2014
Priority:	Standard	Application Received:	10/01/2014

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 license 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 46 year old male who reported low back pain from an injury sustained on 05/24/10 from lifting 25 lb. cases of wine and moving them from one pallet to another. There were no diagnostic imaging reports. Patient is diagnosed with chronic strain with lumbosacral radiculopathy, L4-5 and L5-S1 degenerative disc disease, and left S1 radiculopathy. Patient has been treated with medication, physical therapy and acupuncture. Per medical notes dated 06/03/14, he feels acupuncture helps him manage his pain; he is able to walk easier when he has acupuncture. Per medical notes dated 08/05/14, patient reports after acupuncture his leg symptoms improved, his pain is not as much. He can walk a little more and he sleeps better with treatment which makes him more functional. Medical reports reveal evidence of changes and improvement in findings.

IMR ISSUES, DECISIONS AND RATIONALES

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

Additional acupuncture x 6 sessions to the low back: 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. Per medical notes dated 06/03/14, he feels acupuncture helps him manage his pain; he is able to walk easier when he has acupuncture. Per medical notes dated 08/05/14, patient reports after acupuncture his leg symptoms improved, his pain is not as much. He can walk a little more and he sleeps better with treatment which makes him more functional. Medical reports reveal evidence of changes and improvement in findings, revealing a patient who has achieved objective functional improvement to warrant additional treatment. 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, additional 6 acupuncture treatments to the low back are medically necessary.