

Case Number:	CM14-0179057		
Date Assigned:	11/03/2014	Date of Injury:	06/21/2012
Decision Date:	12/18/2014	UR Denial Date:	10/15/2014
Priority:	Standard	Application Received:	10/28/2014

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 a licensed Chiropractor, has a subspecialty in 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 32 year old female who reported neck and upper back pain from injury sustained on 06/21/12. Mechanism of injury is not documented in the provided medical records. Radiographs of the cervical spine revealed degenerative changes of the left C4-5 and C5-6 facets; and apparent impingement on the adjacent foramen. Patient is diagnosed with cervicalgia; unspecified myalgia and myositis; chronic left myofascial pain. Patient has been treated with medication, trigger point injection. Per medical notes dated 09/02/14, patient presents with worsening of pain on the left trapezius area. Pain is rated at 5/10. She has temporary improvement with trigger point injection. Provider is requesting 6 acupuncture treatments which were modified to 4 by the utilization reviewer. Per guidelines 3-6 treatments are supported for initial course of Acupuncture with evidence of functional improvement prior to consideration of additional care.

IMR ISSUES, DECISIONS AND RATIONALES

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

Acupuncture x 6 sessions: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: Per California Medical Treatment Utilization Schedule (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 not had prior Acupuncture treatment. Provider requested initial trial of 6 acupuncture sessions which were modified to 4 by the utilization reviewer. Per guidelines 3-6 treatments are supported for initial course of Acupuncture with evidence of functional improvement prior to consideration of additional care. Additional visits may be rendered if the patient has documented objective functional improvement. MTUS- Definition 9792.20 (f) 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 Acupuncture is used as an option when pain medication is reduced or not tolerated which was not documented in the provided medical notes. Per guidelines acupuncture is used as an adjunct to physical rehabilitation; medical records did not document concurrent physical therapy treatment. Per medical notes dated 09/02/14, patient present with worsening of pain on the left trapezius area and pain is rated at 5/10. Medical notes do not mention functional deficits or functional goals which the provider would like to accomplish with acupuncture treatments. Per guidelines and review of evidence, 6 Acupuncture visits are not medically necessary.