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| Case Number: | CM14-0020228 | | |
| Date Assigned: | 04/14/2014 | Date of Injury: | 08/03/2012 |
| Decision Date: | 06/09/2014 | UR Denial Date: | 02/11/2014 |
| Priority: | Standard | Application Received: | 02/11/2014 |

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 Medicine has a subspecialty in 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 patient is a 47 year old male with a date of injury of 8/3/2012. According to the progress report dated 12/4/2013, the patient states that his right shoulder and trapezius strain was improving with acupuncture. Significant objective findings include right shoulder tenderness. The patient was diagnosed with trapezius strain.

IMR ISSUES, DECISIONS AND RATIONALES

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

ADDITIONAL ACUPUNCTURE TREATMENT, 1 TIME WEEKLY FOR 4 WEEKS, TO THE RIGHT TRAPEZIUS: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: The acupuncture guideline states that acupuncture treatment may be extended if there is documentation of functional improvement. Records indicate that the patient had more than 6 acupuncture sessions; however, there was no documentation of functional improvement from the acupuncture treatments. Therefore, the provider's request for additional acupuncture treatments once a week for 4 weeks is not medically necessary.