

<b>Case Number:</b>	CM14-0028495		
<b>Date Assigned:</b>	06/20/2014	<b>Date of Injury:</b>	09/14/2011
<b>Decision Date:</b>	07/22/2014	<b>UR Denial Date:</b>	02/28/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/06/2014

### 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 Licensed in Chiropractic & 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 claimant is a 68-year-old female who sustained a work related injury on 9/14/2011. Her diagnoses are lumbago, cervical disc degeneration, pain in joint, osteoarthritis of the pelvis, patella dislocation, arthropathy, and cervicalgia. Six sessions of acupuncture were authorized as a trial on 2/28/2014. Prior treatment includes physical therapy, topical medication, injections, neck surgery, knee surgery, and oral medication. She is working with restrictions. Per a PR-2 dated 5/6/2014, the claimant has had acupuncture. Her left knee is better but she continues to have neck and low back pain. Per a PR-2 dated 4/4/2014 and 3/5/2014, the claimant states that she is the same. There are two acupuncture reports submitted on 2/20/2014 and 2/11/2014. The report on 2/20/2014 reports that there has been no change.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Acupuncture Trial Course times nine (9) sessions to multiple body parts.:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Acupuncture Treatment Guidelines.

**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 at least 8 sessions of acupuncture in the last six months; however, the provider failed to document functional improvement associated with the completion of her acupuncture visits. Her work restrictions have not changed and the reports mostly note that the claimant's condition has not changed. Her last report states that her knee is better; however, no objective measures of improvement are noted. Therefore, further acupuncture is not medically necessary.