

Case Number:	CM14-0028849		
Date Assigned:	06/16/2014	Date of Injury:	09/10/2000
Decision Date:	07/29/2014	UR Denial Date:	02/06/2014
Priority:	Standard	Application Received:	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 Chiropractor 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 claimant is a 62-year-old female, who sustained a work-related injury on 9/10/2000. Her diagnoses are musculoligamentous sprain/strain, disc bulging radiculopathy, sacroiliac dysfunction, morbid obesity, anxiety, depression, lumbar facet arthropathy, medial meniscus tear, tendino-ligamentation injury of the knee, musculoligamentous sprain of the thoracic spine, sprain of the lumbar region, internal derangement of the knee and patellofemoral syndrome pain in the knee. Prior treatment includes acupuncture, physical therapy, TENS, home exercise, oral medication, topical medication, topical medication, and surgery. She has had seventeen (17) total sessions of acupuncture. Per a record review report dated 2/21/2014, the claimant has thirteen (13) sessions of acupuncture from 3/5/2013-8/6/2013. The claimant reports that her activities of daily living, mobility, mood, quality of sleep and quality of life have improved. Four (4) additional sessions of acupuncture were rendered from 8/6/2013-9/13/2013. Per a progress report (PR-2) dated 8/6/2013, the claimant states that her pain remained unchanged since her last visit. She is unable to tolerate work activities. Activities of daily living, mobility, quality of life and quality of sleep are improved. Per a PR-2 dated 9/27/2013, the claimant states that her low back, right knee and left knee pain have increased since last visit. Her activities of daily life, quality of life, mobility are poor. Her quality of sleep is normal. Per a PR-2 dated 10/11/2013, the claimant states that her pain has increased since last visit. She is unable to tolerate work activities. And activities of daily living, mobility, quality of life and quality of sleep are unchanged. Her mood has worsened.

IMR ISSUES, DECISIONS AND RATIONALES

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

Additional acupuncture treatments for the lumbar spine and right knee (date of service: 08/02/2013): Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: The Acupuncture Medical Treatment Guidelines indicate that 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 seventeen (17) sessions of acupuncture. Although initial gains were made, the claimant appears to be getting worse after the last four (4) sessions of acupuncture. In both progress reports dated immediately after the last four (4) sessions, the claimant's pain increased and functional levels were reported to be poor or worsened. Acupuncture does not appear to be helping the claimant or sustaining any objective functional improvement. Therefore, further acupuncture is not medically necessary.