

Case Number:	CM14-0035520		
Date Assigned:	06/23/2014	Date of Injury:	07/09/2013
Decision Date:	08/07/2014	UR Denial Date:	03/10/2014
Priority:	Standard	Application Received:	03/21/2014

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, 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 26 year old female with a date of injury of 7/9/2013. According to the progress report dated 1/15/2014, the patient complained of low back pain that radiates up the back. The patient states that medications helps at time. The patient complained of upset stomach from the prescribed medications. Significant objective findings include paraspinal tenderness and negative straight leg raise. The patient was diagnosed with lumbar sprain/strain, herniated nucleus pulposus.

IMR ISSUES, DECISIONS AND RATIONALES

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

4 Acupuncture Therapy Sessions for the Lumbar Spine: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: The Acupuncture Medical Treatment Guidelines states that acupuncture may be extended if there is documentation of functional improvement. Records indicate that the patient had a trial of acupuncture care. There was no documentation of functional improvement in the submitted documentation; therefore the provider's request for additional 4 acupuncture sessions is not medically necessary at this time.

