

Case Number:	CM14-0037504		
Date Assigned:	06/25/2014	Date of Injury:	11/29/2012
Decision Date:	07/23/2014	UR Denial Date:	03/18/2014
Priority:	Standard	Application Received:	03/28/2014

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 Board Certified in Chiropractic Care, 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 injured worker is a 74 year old female who reported left knee and ankle pain from injury sustained on 11/29/12 due to a trip and fall. Magnetic resonance imaging (MRI) of the left knee revealed anterior cruciate ligament tear. Patient is diagnosed with meniscal tear of left knee and left ankle derangement. Patient has been treated with medication and therapy. Per medical notes dated 02/04/14, patient reports no significant improvement in her left foot. Swelling continues in her ankle and knee. Per notes dated 03/06/14, patient complains of left ankle, left knee and left elbow pain. She has tenderness to palpation of left knee meniscus, left elbow and left ankle. Primary treating physician is requesting two times eight acupuncture sessions. It is unclear if the request is for initial trial of acupuncture or continuation of care. Per notes dated 05/01/14, patient continues to have pain in the knee and ankle. Requested visits exceed the quantity of initial acupuncture visits supported by the cited guidelines. There is no assessment in the provided medical records of functional efficacy with prior acupuncture visits. Medical reports reveal little evidence of significant changes or improvement in findings, revealing a patient who has not achieved significant objective functional improvement to warrant additional treatment.

IMR ISSUES, DECISIONS AND RATIONALES

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

Acupuncture 2 x a week x 8 weeks, left ankle: 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". Medical notes fail to document if the request for acupuncture is for initial course of if the patient has had prior acupuncture treatment. Per guidelines 3-6 treatments are sufficient for initial course of Acupuncture care. Requested visits exceed the quantity of initial acupuncture visits supported by the cited guidelines. Furthermore if acupuncture has been administered previously; there is lack of evidence that prior acupuncture care was of any functional benefit. Medical reports reveal little evidence of significant changes or improvement in findings, revealing a patient who has not achieved significant objective functional improvement to warrant additional treatment. 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. Per guidelines and review of evidence, two times eight Acupuncture visits are not medically necessary.

Acupuncture 2 x a week x 8 weeks, left knee: 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". Medical notes fail to document if the request for acupuncture is for initial course of if the patient has had prior acupuncture treatment. Per guidelines 3-6 treatments are sufficient for initial course of Acupuncture care. Requested visits exceed the quantity of initial acupuncture visits supported by the cited guidelines. Furthermore if acupuncture has been administered previously; there is lack of evidence that prior acupuncture care was of any functional benefit. Medical reports reveal little evidence of significant changes or improvement in findings, revealing a patient who has not achieved significant objective functional improvement to warrant additional treatment. 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

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