

Case Number:	CM14-0045403		
Date Assigned:	06/27/2014	Date of Injury:	03/08/2010
Decision Date:	07/31/2014	UR Denial Date:	03/24/2014
Priority:	Standard	Application Received:	04/01/2014

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 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 injured worker is a 62-year-old female, who reported right neck, right shoulder, right arm, wrist, low back and hip pain from injury sustained on 03/08/10, after a slip and fall. The patient is diagnosed with right shoulder pain and impingement syndrome. An MRI of the right shoulder revealed status post rotator cuff repair; post labral repair; thickening of inferior glenohumeral ligament with mild synovitis and mild glenohumeral arthrosis. X-rays of the lumbar spine were unremarkable. An MRI of the lumbar spine revealed facet arthrosis. The only medical records submitted for review dated 11/01/11, revealed that the patient complains of right shoulder and neck pain rated at 8/10. She has decreased range of motion of the right shoulder. The pain can improve to 5/10, with use of medication and a muscle relaxant, as well as corticosteroid injection. Pain can increase to a 9/10 with repetitive motion. Per utilization review, the patient has been treated with TENS unit, medication, physical therapy, rotator cuff surgery and epidural injection. The primary provider is requesting six (6) acupuncture sessions. Recent medical notes were not submitted for review. Objective functional goals, which the provider hopes to accomplish with a trial of acupuncture sessions, have not been documented to warrant treatment.

IMR ISSUES, DECISIONS AND RATIONALES

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

Six (6) Acupuncture sessions for the right shoulder: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 8 Neck and Upper Back Complaints, Chapter 10 Elbow Disorders (Revised 2007), Acupuncture Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: The Acupuncture Medical Treatment Guidelines indicate that 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. The guidelines also indicate that the time to produce function improvement includes: 3-6 treatments; 2) Frequency: 1-3 times per week; and 3) Optimum duration: 1-2 months. Acupuncture treatments may be extended if functional improvement is documented. The patient hasn't had prior Acupuncture treatment. Acupuncture is used as an option when pain medication is reduced and is not tolerated, which was not documented in the medical records provided for review. The medical records do not indicate if the patient is having concurrent therapy or is involved in home exercise program, which would necessitate treatment. Objective functional goals, which the provider hopes to accomplish with a trial of acupuncture session have also not be documented. According to the guidelines and review of evidence, six (6) Acupuncture visits are not medically necessary.