

Case Number:	CM14-0055180		
Date Assigned:	07/07/2014	Date of Injury:	08/30/2002
Decision Date:	08/09/2014	UR Denial Date:	04/10/2014
Priority:	Standard	Application Received:	04/24/2014

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 67-year-old female who reported neck pain from injury sustained on 08/30/02 due to cumulative trauma. Radiographs of the cervical spine revealed C5-6 spondylosis with loss of disc height with mild right sided C5-6 neuroforaminal stenosis. Patient is diagnosed with cervical sprain and discogenic syndrome. Patient has been treated with medication, therapy, epidural injection and acupuncture. Per medical notes dated 03/22/12, patient complains of neck pain. Base of her neck continues to feel stiff. Her trapezius is also still sore, tight and painful but also improving somewhat. Patient has been receiving acupuncture. Per medical notes dated 04/01/14, patient complains of increase pain in the cervical spine. Examination revealed tenderness to palpation spasm of bilateral trapezius, rhomboids and decreased range of motion. Patient had recent increase in pain of the cervical spine; however, there is limited documentation of a specific aggravation or exacerbating event. 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 To Cervical Spine Two Times A Week For Four Weeks: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: Per 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. Patient has had prior acupuncture treatment. Medical notes report recent increase in pain. However, there is limited documentation of a specific aggravation or exacerbating event. There is lack of evidence that prior acupuncture care was of any functional benefit. There is no assessment in the provided medical records of functional efficacy with prior acupuncture visits. Additional visits may be rendered if the patient has documented objective functional improvement. Per MTUS guidelines, 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 or decrease in medication intake. Per review of evidence and guidelines, two times a week for four weeks of acupuncture treatments are not medically necessary.