

Case Number:	CM14-0063599		
Date Assigned:	07/11/2014	Date of Injury:	06/30/2009
Decision Date:	09/17/2014	UR Denial Date:	04/30/2014
Priority:	Standard	Application Received:	05/06/2014

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 Acupuncture, has a subspecialty in Addiction Detoxification and is licensed to practice in New York. 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 purpose of this review is to consider an additional twelve acupuncture sessions. The applicant is a female employee who has filed an industrial claim for cervical and lumbar spine and left upper extremity injuries that occurred on 6/30/09. Mechanism of injury is unspecified in the records reviewed. Currently the patient complains of severe pain in all aforementioned areas. On 4/16/14, the treating physician requested twelve sessions of acupuncture to treat her pain and to reduce some of her symptoms. It is unclear if the applicant received acupuncture prior with records provided. However, the injury occurred five years prior and she continues to complain of tenderness, muscle spasms in her lumbar and cervical spine and bilateral shoulders. The applicant remains on permanent and stationary status and off work. Her diagnosis consists of cervical and lumbar sprain/strain, bilateral strain/sprain and status post left knee arthroscopy. Her treatment to date based on records reviewed include, but not limited to, surgical intervention, physical therapy, use of walker and cane, home exercise program, and oral and topical pain and anti-inflammatory medications. In the utilization review report, dated 4/30/14, the UR determination did not approve the additional twelve sessions of acupuncture. The treatment request did not reflect whether or not the applicant's condition is an acute exacerbation or chronic and therefore, it is unclear if the acupuncture is for the exacerbation or for maintenance of her condition. The advisor requests further information in order to determine future requests. The request was denied.

IMR ISSUES, DECISIONS AND RATIONALES

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

Outpatient acupuncture two (2) times a week for six (6) weeks to multiple body parts:
Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: Records provided neglect to report prior conservative treatments, except the aforementioned, therefore, evaluating initial acupuncture care is based on utilizing the MTUS guidelines for acupuncture medical treatment. MTUS recommends an initial trial of 3-6 visits of acupuncture. Additionally, MTUS recommends acupuncture is used as an option when pain medication is reduced or not tolerated, it may be used as an adjunct to physical rehabilitation and/or surgical intervention to hasten functional recovery. Further acupuncture, beyond an initial trial depends upon "functional improvement", as defined by MTUS. There is no clinical data provided by the treating physician regarding a decrease or intolerance to her medication, recent involvement in physical rehabilitation program or surgical intervention recently. Therefore, given the MTUS guidelines for acupuncture care detailed above and including the fact the initial trial is quantifiably less than twelve visits, the original request of twelve sessions of acupuncture is not medically necessary.