

Case Number:	CM14-0077336		
Date Assigned:	07/18/2014	Date of Injury:	03/28/2012
Decision Date:	09/08/2014	UR Denial Date:	04/24/2014
Priority:	Standard	Application Received:	05/27/2014

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 29-year-old female with a date of injury of 3/28/2012. According to the report dated 1/9/2014, the patient complained of depressed mood, sleeplessness, chronic pain, anxiety/nervousness, and worries. The objective findings were unremarkable.

IMR ISSUES, DECISIONS AND RATIONALES

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

Acupuncture two times a week for five weeks, to bilateral lower extremities.: Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: There was no evidence that the patient had prior acupuncture care. The acupuncture medical treatment guidelines recommend acupuncture for pain. The guideline recommends a trial of 3 to 6 treatments with a frequency of 1 to 3 times per week over 1 to 2 months to produce functional improvement. The patient is a candidate for a trial of acupuncture treatment at this time; however, the provider's request for 2 acupuncture sessions per week for 5 weeks exceeds the guidelines recommendation. Therefore, provider's request is not medically necessary at this time.