

Case Number:	CM14-0084504		
Date Assigned:	07/21/2014	Date of Injury:	10/12/2009
Decision Date:	08/27/2014	UR Denial Date:	05/29/2014
Priority:	Standard	Application Received:	06/06/2014

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 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:

Claimant is 61 year old male who sustained a work related injury on 10/12/2009. His diagnoses are lumbar sprain, lumbosacral neuritis, brachial neuritis, cervicalgia, cervical disc disc displacement, thoracic/lumbar disc displacement, spinal stenosis lumbar, rotator cuff syndrome, neck sprain, shoulder and arm sprain, depress psychosis, generalized anxiety, psychic factor, and lumbar disc displacement. Prior treatment includes psychotherapy, hypnotherapy, TENS, physical therapy, oral medication, and topical medication. Per a PR-2 dated 7/2/2014, the claimant has continued complaints of neck and low back pain that are about the same as his last visit. The medications are helping his pain. He reports that physical therapy and acupuncture are also helpful. He is not working. Per a PR-2 dated 6/4/2014, the claimant states that acupuncture is helping presently. His pain is the same and he is getting burning sensation in his low back which radiates to the right buttock and back of thigh. Per a PR-2 dated 5/7/2014, the claimant states that acupuncture is helping him relax. Per a PR-2 dated 5/7/2014, the claimant states that acupuncture is helping him relax. Per a PR-2 dated 2/20/2014, the claimant states that current acupuncture have helped him but he continues to have neck and low back pain. Per a PR-2 dated 1/8/2014, the claimant states that acupuncture helps him relax. Per a PR-2 dated 11/6/2013, the claimant states that acupuncture has been helpful. Per a PR-2 dated 10/9/2013, the claimant states that acupuncture is helping to relieve his neck pain and that his back pain is improving with acupuncture.

IMR ISSUES, DECISIONS AND RATIONALES

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

Acupuncture two (2) times a week for six (6) weeks for the Cervical and Lumbar Spine:
Upheld

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

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: According to evidenced based guidelines, further acupuncture visits after an initial trial are medically necessary based on documented functional improvement. "Functional improvement" means a clinically significant improvement in activities of daily living or a reduction in work restrictions, medication, or dependency on continued medical treatment. The claimant has had an unknown quantity of acupuncture over at least a ten month period with continued reported subjective improvement of pain and relaxation. However the provider failed to document functional improvement associated with the completion of her acupuncture visits. In regards to previous acupuncture rendered, there were no significant, measurable outcomes, increased ability to perform activities of daily living, increased ability to perform job-related activities, or reduced medication related to acupuncture treatment. Therefore further acupuncture is not medically necessary.