

<b>Case Number:</b>	CM14-0086775		
<b>Date Assigned:</b>	07/23/2014	<b>Date of Injury:</b>	05/03/2013
<b>Decision Date:</b>	09/03/2014	<b>UR Denial Date:</b>	05/22/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/09/2014

### 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 and Chiropractic 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 68 year old female with a date of injury of 5/3/2013. According to the submitted records, the patient complained of neck, low back, and bilateral knee pain with knee weakness. Objective findings include decrease lumbar range of motion.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Four (4) Acupuncture sessions, 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:** There was no record in the submitted documents that the patient had completed a trial course of acupuncture. The patient complained of low back and neck pain. The guideline recommends a trial of 3-6 acupuncture sessions for pain. With documentation of functional improvement, the guidelines state that the acupuncture sessions may be extended. The patient was authorized a trial of 4 acupuncture sessions. There was no documentation of functional improvement from the 4 authorized sessions. The provider's request for 4 acupuncture sessions is not medically necessary at this time without documentation of functional improvement from the acupuncture trial.

