

Case Number:	CM14-0188178		
Date Assigned:	11/18/2014	Date of Injury:	05/22/2013
Decision Date:	01/07/2015	UR Denial Date:	10/28/2014
Priority:	Standard	Application Received:	11/12/2014

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, 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:

This case involves a 57 year old injured worker who sustained an injury to her foot on 05/22/2013. According to a supplemental letter from a Qualified Medical Examiner (QME) on 10/17/2014, her employment requires continuous walking and her history reflects use of foot braces and orthotics. According to x-rays of 05/31/2013 and 01/07/2014 (which are not available with this medical record), the injured worker has heel spurs and degenerative changes in addition to impairment sustained in the injury. The current diagnoses are foot sprain/strain, metatarsalgia, and plantar facitis. A request for Acupuncture treatments x 12 was made following the injured worker's last office visit on 10/21/2014. There is no record available of physical therapy, surgeries or chiropractic care. According to the primary treating physician's progress report of 10/21/2014, the injured worker has found paraffin baths to the feet were helpful in reducing pain. Medications include ibuprofen for pain. There was no documentation of any intolerance or reduction in pain medication and there is no documented plan to use acupuncture as an adjunct to physical rehabilitation or surgical intervention. On 10/28/2014, a utilization review (UR) decision was issued that non-certified the request for Acupuncture x 12 visits based on the California Medical Treatment Utilization Schedule guidelines.

IMR ISSUES, DECISIONS AND RATIONALES

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

Twelve sessions of acupuncture to the bilateral feet: 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". The patient has not had prior Acupuncture treatment. The provider requested initial trial of 12 acupuncture treatments for bilateral feet which were denied by the utilization reviewer. Per guidelines 3-6 treatments are supported for initial course of Acupuncture with evidence of functional improvement prior to consideration of additional care. Requested visits exceed the quantity of initial acupuncture visits supported by the cited guidelines. Additional visits may be rendered if the patient has documented objective functional improvement. MTUS- Definition 9792.20 (f) 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. Acupuncture is used as an option when pain medication is reduced or not tolerated which was not documented in the provided medical records. Per guidelines and review of evidence, this request is not medically necessary.